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COUNTY BOROUGH OF ROTHERHAM

REPORT

BY THE

MEDICAL OFFICER OF HEALTH

WILLIAM BARR, M.D., D.Sc., D.P.H.

FOR THE YEAR

1946



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COUNTY BOROUGH OF ROTHERHAM

MEDICAL SERVICES COMMITTEE.

PUBLIC HEALTH AND HOUSING COMMITTEE.

(as at 31st December, 1946).

HIS WORSHIP THE MAYOR (Alderman F. C. WOFINDEN).

Chairman:

Alderman A. BUXTON, J.P.

Chairman:

Alderman F. HARPER, J.P.

Vice-Chairman:

Councillor A. R. SHAYLER.

Vice-Chairman:

Councillor L. KIRK.

Alderman S. HALL, O.B.E., J.P.

„ F. HARPER, J.P.

Councillor W. G. DENHAM.

„ C. DUFFIELD.

„ C. E. GEARY, J.P.

„ Mrs. F. L. GREEN, J.P.

„ S. HARRIS.

„ A. LISTER.

„ J. E. MICKLETHWAIT.

„ Mrs. M. H. MOORHOUSE,
J.P.

„ A. WILDE.

Alderman A. BUXTON, J.P.

Councillor F. DAVIES.

„ J. H. DICKINSON, J.P.

„ F. DUKE.

„ Mrs. F. L. GREEN, J.P.

„ Mrs. E. McNICHOLAS.

„ Mrs. M. H. MOORHOUSE,
J.P.

„ A. R. SHAYLER.

„ L. J. TARBIT.

„ A. WILDE.

„ M. W. YOUNG.

JOINT COMMITTEES.

SHEFFIELD, ROTHERHAM AND DISTRICT SMOKE ABATEMENT COMMITTEE.

Alderman F. HARPER, J.P.

Councillor F. DAVIES

SOUTH WEST YORKSHIRE JOINT BOARD FOR THE MENTALLY DEFECTIVE.

HIS WORSHIP THE MAYOR (Alderman F. C. WOFINDEN).

Alderman A. BUXTON, J.P.

HEALTH OFFICERS OF THE LOCAL AUTHORITY.

(as at 31st December, 1946).

WILLIAM BARR, M.D., D.Sc., D.P.H.	Medical Officer of Health and Chief School Medical Officer.
N. M. MACDONALD, M.B., Ch.B., D.P.H.	Deputy Medical Officer of Health and Senior School Medical Officer.
T. V. GRIFFITH, M.B. Ch.B., B.A.O.	Medical Superintendent, Municipal General Hospital; Public Vaccinator, North-West Rotherham and Municipal General Hospital; Police Surgeon; District Medical Officer.
A. C. MORRISON, M.D., D.P.H.	Tuberculosis Officer; Medical Superintendent, Oakwood Hall Sanatorium; Medical Superintendent, Isolation Hospital.
GEORGE E. WESTBY	Lay Administrative Officer.
MR. N. FROGGATT	Senior Clerk.
MISS J. CASELDINE	Secretary, Medical Officer of Health.
General Office	Seven Clerks.

CONSULTANT STAFF (part-time).

H. L. CROCKATT, M.B., Ch.B.	Orthopaedics.
GLYN A. DAVIES, F.R.C.S.Ed., M.R.C.O.G., M.B., Ch.B.	Obstetrics.
H. N. GREEN, M.A., M.D., M.Sc.	Hon. Advisor in clinical pathology.
W. J. LYTLE, F.R.C.S., M.B., B.Ch., B.A.O.	Surgery.
H. A. COLE, M.B., Ch.B.	Mental diseases (Honorary).
W. M. MUIRHEAD, M.B., Ch.B., D.O.M.S., R.C.P.S.Eng.	Ophthalmology.
A. E. NAISH, M.A., M.D., F.R.C.P.	Paediatrics.
C. L. PATTISON, M.B., B.S., M.R.C.S., L.R.C.P.	Surgical tuberculosis.
H. M. PETTY, M.B., Ch.B., D.L.O., R.C.P.S.Eng.	Diseases of ear, nose, and throat.
C. P. BEATTIE, M.A., M.B., D.P.H.	Hon. Advisor in bacteriology.

PUBLIC ANALYST (part-time).

H. CHILDS, B.Sc., F.R.I.C.	Public Analyst.
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SANITARY INSPECTORS' SECTION.

MR. J. E. FULLER (1), (2), (4), (5), (6)

MR. W. PEARCE (1), (2), (5), (6)

MR. T. W. PEARCE (1) (2) (5) (6)

MR. G. C. HARRISON (1)

MR. S. MASTIN (1), (2)

MR. L. W. LODGE (1), (2)

(One vacancy.)

MR. J. H. HOARE (3)

Senior Sanitary Inspector.

Assistant Senior Sanitary Inspector and Inspector of Food and Drugs.

District Sanitary Inspector.

District Sanitary Inspector.

District Sanitary Inspector.

District Sanitary Inspector.

Smoke Inspector (by arrangement with the Sheffield, Rotherham and District Smoke Abatement Committee).

Two Disinfectors.

One Ratcatcher.

Two Clerks.

One Inspector of Common Lodging Houses (part-time).

QUALIFICATIONS.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Meat and other foods).
- (3) Certificate, Royal Sanitary Institute (Smoke Inspector).
- (4) Certificate, San. Insp. Assoc. Exam. Bd. (Sanitary Inspector).
- (5) Certificate, Board of Education, Building Construction.
- (6) Certificate, City and Guilds Institute, Plumbing.

HEALTH VISITORS.

MISS J. BARRACLOUGH (1), (5)

MISS E. G. CRESSWELL (4), (5)

MISS S. A. SIMM (3), (4), (5)

MRS. M. AIRTON (2), (5)

MISS J. OLDERSHAW (3), (4), (5)

MRS. E. MARSDEN (3), (4)

MISS G. J. BOOKER (3), (4), (5)

MISS M. HANSON, (3), (4), (5), (6), (7).

MISS E. M. SMITH, (3), (4), (5).

MISS E. G. TAYLOR, (3), (4), (5).

MISS M. K. CAINE, (3), (4), (5).

(One Vacancy.)

M. C. W. SECTION

Superintendent Health Visitor and Non-Medical Supervisor of Midwives.

Assistant Senior Health Visitor.

Health Visitor.

Health Visitor.

Health Visitor.

Health Visitor.

Health Visitor.

Health Visitor/Social Worker.

Health Visitor.

Health Visitor.

Health Visitor.

Five Clerks.

QUALIFICATIONS.

- (1) Certificate, Royal Sanitary Institute (Sanitary Inspector).
- (2) Certificate, Royal Sanitary Institute (Health Visitor).
- (3) Health Visitors Exam. under Ministry of Health Regulations.
- (4) State Registered Nurse.
- (5) State Certified Midwife.
- (6) State Registered Fever Nurse.
- (7) Social Study Certificate, University of Glasgow.

SCHOOL MEDICAL SERVICE.

N. M. MACDONALD, M.B., Ch.B., D.P.H.

R. C. WOFINDEN, M.D., B.S., D.P.H.,
M.R.C.S., L.R.C.P., D.P.A. (to 31.12.46).

J. URQUHART, M.B., Ch.B., D.P.H.

MARY D. BOYD, M.B., Ch.B.

R. HEALD, L.D.S.

MISS D. M. BATEMAN, B.Ch.D., L.D.S.

G. W. LOWE, L.D.S.

MISS A. C. HAMPTON, C.S.M.M.G.

and M.G. (1)

MISS C. H. CROFTON (1), (2)

MISS G. K. CAVE (1), (2)

MRS. N. LLOYD (1)

MISS E. M. BORMAN (1)

MRS. E. RANDS (1)

MISS N. EASTON (1), (2)

MISS E. BATES (1), (2), (3)

MISS W. M. COOPER

Five Clerks.

Three Dental Attendants.

QUALIFICATIONS.

(1) State Registered Nurse.

(2) State Certified Midwife.

(3) State Registered Fever Nurse.

MUNICIPAL GENERAL HOSPITAL.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.

D. BALLANTINE, M.B., Ch.B., F.R.C.S.,
M.R.C.O.G., L.M.

P. R. WOODCOCK, M.B., Ch.B., B.A.O.

M. BEASLEY, L.R.C.P. and S.

H. M. THOMPSON, M.B., Ch.B.

A. BAGON, L.M.S.S.A.

H. M. MILLS, M.B., Ch.B.

MISS C. E. DAVIS

MISS H. GREEN

MISS N. M. SINGLETON

MISS A. M. SUMMERGILL

MRS. L. K. LEGGOTT

MISS M. BETTERTON

MR. E. E. DAVIES

MISS R. K. COOPER

MISS F. G. WATERHOUSE

MR. S. STOPPARD

MISS G. CALAM

MISS M. M. USHER

Six Clerks.

Deputy Medical Officer of Health and Senior
School Medical Officer.

Assistant Medical Officer (Schools and Child
Welfare), Medical Officer, Venereal Diseases.

Assistant Medical Officer (Schools and Child
Welfare).

Assistant Medical Officer (Schools and Child
Welfare).

School Dental Surgeon.

Assistant School Dental Surgeon.

Assistant School Dental Surgeon.

Physiotherapist.

School Nurse.

School Nurse.

School Nurse.

School Nurse.

School Nurse.

School Nurse (Nurseries and Child Welfare).

School Nurse.

Senior Clerk.

Medical Superintendent.

Deputy Medical Superintendent and Obstetric
Officer.

Assistant Resident Medical Officer.

Assistant Resident Medical Officer.

Assistant Resident Medical Officer.

District Medical Officer.

District Medical Officer (part-time).

Matron.

Assistant Matron.

Sister Tutor (Nursing).

Sister Tutor (Midwifery).

Warden, Nurses' Homes.

Radiographer.

Physiotherapist.

Senior Dispenser.

Assistant Dispenser.

Clerk and Steward.

Domestic Staff Supervisor.

Senior Clerk.

OAKWOOD HALL SANATORIUM.

A. C. MORRISON, M.D., D.P.H.
T. P. LENNON, L.R.C.P. and S.
MISS L. CRADDOCK
MRS. E. SHARPLES

Medical Superintendent.
Assistant Resident Medical Officer.
Matron.
Teacher (Uncertificated).

ISOLATION HOSPITAL.

A. C. MORRISON, M.D., D.P.H.
MISS C. BARRACLOUGH

Medical Superintendent.
Matron.

TUBERCULOSIS DISPENSARY.

A. C. MORRISON, M.D., D.P.H.
One Clerk.

Tuberculosis Officer.

VENEREAL DISEASES CENTRE.

R. C. WOFINDEN, M.D., B.S., D.P.H.,
M.R.C.S., L.R.C.P., D.P.A. (to 31.12.46).
MR. P. DOANE
MRS. P. MILLBURN, S.R.N., S.C.M.

V.D. Medical Officer.

Venereal Diseases Orderly
Venereal Diseases Nurse.

CLINICAL LABORATORY.

L. P. CLARKE, M.R.C.S., L.R.C.P., D.P.H.
MR. C. W. OLIVER, B.Sc., A.M.I.L.T.
Two Technicians.
One Student Technician.
Two Clerks.

Clinical Pathologist.
Chief Technician.

MIDWIFERY SERVICE.

D. BALLANTINE, M.B., Ch.B., F.R.C.S.,
M.R.C.O.G., L.M.
MISS J. BARRACLOUGH
MRS. M. J. WALSH
MRS. S. E. GOSLING
MISS E. D. JEYES
MRS. I. MCGANN
MISS A. SIMM
MRS. E. PUGH
MISS K. RAY
MRS. G. HEWITT
MRS. M. M. WOOD
MISS L. BENJAMIN (to 31.12.46)
MRS. E. CHAPMAN
MRS. P. E. SHREEVES
MRS. G. M. FINAN

Obstetric Officer.

Non-Medical Supervisor of Midwives.
Superintendent Midwife.
Deputy Superintendent Midwife.
District Midwife.
District Midwife.
District Midwife.
District Midwife.
District Midwife.
District Midwife.
District Midwife.
District Midwife.
Relief Midwife.

DAY NURSERY.

MRS. D. ARDRON

Matron, Thames Street Nursery.

PUBLIC VACCINATION.

T. V. GRIFFITH, M.B., Ch.B., B.A.O.

H. R. ELLIOTT, M.R.C.S., L.R.C.P.
D. P. K. JOCKEL, M.D.
MR. F. S. BUTCHER

Public Vaccinator, North-West Rotherham and
Municipal General Hospital.
Public Vaccinator, South-East Rotherham.
Public Vaccinator, Rawmarsh (part of).
Vaccination Officer.

DEPARTMENT OF HEALTH,
MUNICIPAL OFFICES,
ROTHERHAM.

I submit herewith the annual report on the health services of the County Borough of Rotherham for the year 1946, and regret the delay in its publication.

This is due to the heavy pressure of work undertaken during 1947 in the preparation of the Council's proposals for its health services under the National Health Service Act, 1946, which had to be given priority in order to keep the time table scheduled by the Ministry of Health. Ordinarily such work could have been taken by the staff and myself without difficulty, but the departure of three of my medical assistants to appointments in other areas, Dr. Wofinden on 31st December, 1946, Dr. Urquhart on 30th April and Dr. Macdonald on 31st July, 1947, caused a serious staff depletion. Thus for the main part of 1947 there were vacancies in the senior staff positions, and my special thanks are due to those remaining who helped me to overcome a difficult year.

The growth of the services noted last year continued and in the body of the report will be found the detailed activities of each section. Specific reference might well be made to the diphtheria immunisation campaign which was again a special effort during the year.

The appointment of a health visitor/social worker to the staff in view of the work performed for adoptions, etc., is a notable addition.

Reference should be made to the continued growth of the laboratory service which also undertakes the work of dispensing penicillin to the Rotherham hospitals and clinics. The use of this drug in the treatment of venereal diseases is also worthy of mention and details can be found in Section VIII of this report.

Finally I have to thank those in charge of the various sections of the department and, through them, all the members of the staff who so effectively contributed to the work of the year.

WILLIAM BARR,
Medical Officer of Health.

SECTION I

STATISTICS AND SOCIAL CONDITIONS OF THE AREA.

GENERAL STATISTICS.

Area (in acres)	9,255
Population (census) 1931: Prior to 1st April, 1936	69,691	
As constituted 1st April, 1936	...	...	...	...	...	...	75,223
Population (estimated civilian) 1946	...	...	...	...	...	...	78,610
Number of inhabited houses (1/4/1947)	...	...	...	...	...	...	21,923
Rateable value (1/4/1947)	...	...	...	...	...	...	£488,595
Sum represented by a penny rate (1/4/1947)	...	...	...	...	...	...	£2,000

VITAL STATISTICS.

In the following summary extracts from the vital statistics for the year are given :—

Live births:	Total	Male	Female				
Legitimate ...	1661	842	819	—	Birth rate per 1,000 of the estimated		
Illegitimate ...	107	54	53		resident population ...	22.49	
Stillbirths ...	41	23	18	—	Rate per 1,000 (live and still) births	22.66	
Deaths ...	858	461	397	—	Crude death rate per 1,000 of the		
					estimated resident population ...	10.96	
					Adjusted death rate per 1,000 of the		
					estimated resident population		
					(comparability figure) ...	12.60	

								Rate per 1,000 total (live and still) births
Deaths from puerperal causes:							Deaths	
Puerperal sepsis	...	...	...	...	...	...	2	1.10
Other puerperal causes	...	...	...	...	...	...	1	0.55
							<hr/>	<hr/>
Total	...	...	...	...	...	...	3	1.65

Death rate of infants under one year of age:

All infants per 1,000 live births	...	...	...	...	...	...	...	51
Legitimate infants per 1,000 legitimate live births	...	...	...	...	...	...	...	50
Illegitimate infants per 1,000 illegitimate live births	...	...	...	...	...	...	...	84
Deaths from measles (all ages)	...	...	...	...	...	...	...	—
Deaths from whooping cough (all ages)	...	...	...	...	...	...	...	1
Deaths from diarrhoea (under 2 years of age)	...	...	...	...	...	...	...	10

In the tables which follow are given the detailed vital statistics of the County Borough.

Other tables of a more specific nature are incorporated in the later sections of this report dealing with infectious diseases generally, tuberculosis, venereal diseases, maternity and child welfare and mental deficiency.

In the following table the causes of death at different periods of life, as supplied by the Registrar General, are given for the year 1946. The inclusion of this is considered desirable by the Ministry of Health for the purpose of comparison with the figures for other areas, and relates to deaths *registered* in the calendar year, which totalled 858.

The remainder of the figures relating to deaths in other tables of this report are those of the actual deaths which *occurred* during the year, totalling 862 and have been compiled locally.

Cause of death	MALES							FEMALES							Total
	0-	1-	5-	15-	45-	65-	Total	0-	1-	5-	15-	45-	65-	Total	
1. Typhoid and paratyphoid fevers	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
2. Cerebro-spinal fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
3. Scarlet fever	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
4. Whooping cough	-	1	-	-	-	-	1	-	-	-	-	-	-	-	1
5. Diphtheria	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
6. Tuberculosis of respiratory system	-	-	-	6	5	2	13	-	1	-	9	2	-	12	25
7. Other tuberculous diseases	-	-	-	-	1	-	1	-	-	-	-	1	-	1	2
8. Syphilis	-	-	-	-	3	2	5	-	-	-	-	1	-	1	6
9. Influenza	-	-	-	2	1	-	3	-	-	-	-	1	3	4	7
10. Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
11. Acute polio-myelitis and polio-encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
12. Acute infectious encephalitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
13. Cancer of buccal cavity and oesophagus (M) uterus (F)	-	-	-	-	2	2	4	-	-	-	4	2	2	8	12
14. Cancer of stomach and duodenum	-	-	-	2	5	13	20	-	-	-	-	3	9	12	32
15. Cancer of breast	-	-	-	-	-	-	-	-	-	-	-	7	9	16	16
16. Cancer of all other sites	-	-	-	5	19	29	53	-	-	-	2	11	13	26	79
17. Diabetes	-	-	-	-	1	1	2	-	-	-	2	2	3	7	9
18. Intra-cranial vascular lesions	-	-	-	-	11	34	45	-	-	-	1	5	31	37	82
19. Heart disease	-	-	-	3	27	52	82	-	-	-	6	16	49	71	153
20. Other circulatory diseases	-	-	-	1	2	12	15	-	-	-	-	3	19	22	37
21. Bronchitis	-	-	-	2	19	36	57	2	-	-	1	9	24	36	93
22. Pneumonia	9	2	-	1	9	5	26	10	-	-	3	3	3	19	45
23. Other respiratory diseases	-	-	-	1	-	2	3	-	-	-	2	-	2	4	7
24. Ulcer of stomach or duodenum	-	-	-	-	3	1	4	-	-	-	-	-	-	-	4
25. Diarrhoea (under 2 years of age)	7	-	-	-	-	-	7	3	-	-	-	-	-	3	10
26. Appendicitis	-	-	-	1	-	-	1	-	-	-	1	1	-	2	3
27. Other digestive diseases	-	1	-	-	3	3	7	-	1	-	-	3	5	9	16
28. Nephritis	-	-	-	3	1	7	11	-	-	-	2	3	6	11	22
29. Puerperal sepsis	-	-	-	-	-	-	-	-	-	-	2	-	-	2	2
30. Other maternal causes	-	-	-	-	-	-	-	-	-	-	1	-	-	1	1
31. Premature birth	13	-	-	-	-	-	13	13	-	-	-	-	-	13	26
32. Congenital malformation, birth injury, etc.	14	-	-	-	-	-	14	11	1	1	-	-	-	13	27
33. Suicide	-	-	-	3	1	-	4	-	-	-	1	1	-	2	6
34. Road traffic accidents	-	-	1	2	-	2	5	-	-	-	-	1	1	2	7
35. Other violent causes	1	-	1	3	6	3	14	3	1	-	1	2	2	9	23
36. All other causes	3	3	-	4	6	35	51	2	-	-	5	5	42	54	105
Total—all causes	47	7	2	39	125	241	461	44	4	1	43	82	223	397	858

In the following table the vital statistics of the Borough in relation to the months of the year are given :—

		Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total 1946
Rainfall—	No. of wet days	15	13	9	9	10	18	14	17	16	14	24	21	180
	Inches of rain	2.13	2.22	1.18	0.99	2.70	3.58	3.45	4.56	3.02	1.08	4.69	2.68	32.28
	Maximum daily fall—day ..	29th	8th	3rd	4th	20th	23rd	26th	24th	20th	21st	19th	8th	—
	Maximum daily fall—inches..	0.53	0.92	0.46	0.35	1.18	1.55	1.99	0.82	0.98	0.30	0.90	0.39	—
Births—	Total	117	120	153	156	157	159	177	135	123	145	138	161	1741
	Birth rate	17.86	18.32	23.35	23.81	23.96	24.28	27.02	20.61	18.78	22.14	21.07	24.58	22.49
Deaths—	Gross	158	102	105	73	76	60	84	61	51	80	78	102	1030
	Outward transfers	37	27	22	14	16	14	17	5	13	17	21	22	225
	Inward transfers	6	5	8	4	3	8	4	7	3	3	4	2	57
	Nett	127	80	91	63	63	54	71	63	41	66	61	82	862
	Death rate (crude)	19.38	12.21	13.89	9.62	9.62	8.24	10.84	9.62	6.26	10.07	9.31	12.51	10.96
Nett deaths under 1 year of age ..		14	9	9	9	6	8	5	5	3	9	6	9	92
Infantile mortality rate per 1000 births ..		120	75	59	58	38	50	28	37	24	62	43	56	51
CASES OF INFECTIOUS DISEASES REPORTED	Acute anterior polio-myelitis	—	—	—	—	—	—	—	—	1	—	—	—	1
	Acute polio-encephalitis	—	—	—	—	—	—	—	—	—	—	—	—	—
	Cerebro-spinal meningitis	—	—	—	—	—	1	—	—	—	1	—	—	2
	Diphtheria	3	3	7	6	5	3	1	—	—	—	3	2	33
	Dysentery	7	2	5	1	1	—	—	—	—	6	—	—	22
	Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas	2	1	2	1	6	1	2	2	2	2	2	6	29
	Malaria	—	—	1	1	1	—	—	—	—	—	—	—	3
	Measles	1	1	—	1	—	2	6	84	15	15	62	73	260
	Ophthalmia neonatorum	1	—	—	1	1	—	—	1	—	—	1	2	7
	Pemphigus neonatorum	—	1	1	—	—	—	—	—	—	1	—	—	3
	Pneumonia	15	18	5	5	6	6	3	4	1	5	4	7	79
	Puerperal pyrexia	—	2	—	2	—	4	—	—	—	1	1	1	11
	Relapsing fever	—	—	—	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	17	12	11	11	7	10	9	5	15	9	14	8	128
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers ..	—	—	—	—	—	—	—	—	—	1	—	—	1
	Typhus fever	—	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	37	19	38	14	30	12	16	11	5	10	13	17	222
	Pulmonary tuberculosis—	Males	2	2	4	3	2	1	1	—	2	2	3	25
			2	—	1	—	2	1	—	2	1	3	1	13
	Other forms of tuberculosis—	Males	—	—	1	—	1	—	—	1	—	—	—	3
			—	—	—	—	1	1	—	—	1	—	—	3
DEATHS	Diphtheria	—	—	—	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—
	Measles	—	—	—	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	—	—	—	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—	—	—	—
	Whooping cough	—	—	—	—	—	—	1	—	—	—	—	—	1
	Tuberculosis—	respiratory	3	1	3	3	2	4	1	—	1	1	3	25
			—	—	—	—	—	—	—	2	—	—	—	2
	Influenza	2	2	2	—	—	—	—	—	—	—	—	—	6
	Diarrhoea and enteritis (under 2 yrs.)	1	2	1	1	—	1	—	—	—	1	2	1	10
	Bronchitis	24	3	15	6	4	6	5	8	2	4	5	9	91
	Pneumonia	8	3	5	3	2	2	2	4	3	2	1	8	43
	Malignant disease	15	10	8	9	14	10	15	16	10	8	12	12	139
	Diseases of the heart	19	17	18	16	12	8	9	14	10	9	7	17	156
	Nephritis and Bright's disease ..	1	3	5	3	1	1	2	1	1	1	—	3	22

In the subsequent table the vital statistics of the Borough in relation to the various wards are shown :—

	Clifton Ward	East Ward	Greas- bro' Ward	Kim- ber- worth Ward	Mas- bro' Ward	North Ward	St. Ann's Ward	South Ward	Thorn- hill Ward	West Ward	Total 1946
Estimated civilian population ..	11000	14390	3350	10210	5200	6220	7170	9340	5060	6670	78610
Number of houses, 31/12/46 ..	3056	4012	944	2876	1464	1751	2020	2632	1425	1653	21833
Acreage	785	952	1403	2913	411	300	122	711	212	1446	9255
Density of houses per acre ..	3.89	4.21	0.67	0.99	3.56	5.83	16.56	3.70	6.72	1.14	2.36
Density of population per acre ..	14.02	15.12	2.39	3.50	12.66	20.73	58.76	13.13	23.87	4.61	8.50
Births— Total	225	332	65	201	144	128	188	149	139	170	1741
Birth rate	20.46	23.07	19.40	19.69	27.70	20.58	26.22	15.95	27.47	25.49	22.49
Deaths— Gross	154	132	28	91	75	67	93	90	68	232	1030
Outward transfers	42	1	1	5	2	—	—	2	—	172	225
Inward transfers	7	7	2	10	3	10	7	6	2	3	57
Nett	119	138	29	96	76	77	100	94	70	63	862
Death rate (crude)	10.81	9.59	8.66	9.40	14.62	12.38	13.95	10.07	13.83	9.44	10.96
Nett deaths under 1 year of age ..	12	11	3	11	8	9	17	8	5	8	92
Infantile mortality rate per 1000 births	53	33	46	55	56	70	90	54	36	47	51
CASES OF INFECTIOUS DISEASES REPORTED	Acute anterior polio-myelitis ..	—	1	—	—	—	—	—	—	—	1
	Acute polio-encephalitis ..	—	—	—	—	—	—	—	—	—	—
	Cerebro-spinal meningitis ..	—	—	—	—	—	1	—	—	1	2
	Diphtheria	19	4	—	—	2	3	4	1	—	33
	Dysentery	6	4	—	—	4	—	5	1	2	22
	Encephalitis lethargica	—	—	—	—	—	—	—	—	—	—
	Erysipelas	3	5	2	4	3	3	1	—	2	29
	Malaria	1	—	—	—	—	1	—	1	—	3
	Measles	11	47	37	103	14	8	18	4	4	260
	Ophthalmia neonatorum	—	—	—	—	1	—	—	2	4	7
	Pemphigus neonatorum	1	1	—	—	1	—	—	—	—	3
	Pneumonia	9	10	2	17	8	2	5	5	5	79
	Puerperal pyrexia	—	1	1	1	—	2	—	—	6	11
	Relapsing fever	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	8	25	9	28	6	14	12	6	10	128
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid and paratyphoid fevers ..	—	—	—	—	1	—	—	—	—	1
	Typhus fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	28	41	6	22	17	23	32	20	16	222
	Pulmonary tuberculosis—										
	Males	1	4	1	2	3	1	4	5	3	25
	Females	2	4	—	2	—	2	—	—	1	13
	Other forms of tuberculosis—										
	Males	—	1	—	1	—	—	1	—	—	3
	Females	—	2	—	—	—	1	—	—	—	3
	Diphtheria	—	—	—	—	—	—	—	—	—	—
	Erysipelas	—	—	—	—	—	—	—	—	—	—
	Measles	—	—	—	—	—	—	—	—	—	—
	Scarlet fever	—	—	—	—	—	—	—	—	—	—
	Smallpox	—	—	—	—	—	—	—	—	—	—
	Typhoid fever	—	—	—	—	—	—	—	—	—	—
	Whooping cough	—	—	—	1	—	—	—	—	—	1
	Tuberculosis—respiratory	3	3	—	2	2	2	5	4	2	25
	other forms	—	1	—	1	—	—	—	—	—	2
	Influenza	—	1	—	2	1	—	—	1	—	6
DEATHS	Diarrhoea and enteritis (under 2 years)	1	—	1	2	—	1	1	2	—	10
	Bronchitis	9	18	1	10	10	12	6	5	9	91
	Pneumonia	7	4	2	8	2	7	3	4	2	43
	Malignant disease	24	22	5	20	15	15	12	8	9	139
	Diseases of the heart	20	24	5	20	14	14	20	17	7	156
	Nephritis and Bright's disease ..	2	1	—	2	2	3	3	3	3	22

The following table shows the birth-rate, death-rate, and analysis of mortality, during the years 1942-1946, compared with England and Wales as a whole and various other areas.

(The mortality rates for England and Wales refer to the whole population but for London and the towns to civilians only.)

	Year	RATE PER 1,000 TOTAL POPULATION		ANNUAL DEATH-RATE PER 1,000 POPULATION								RATE PER 1,000 BIRTHS		RATE PER 1,000 LIVE AND STILL-BIRTHS		
		Live births	Still births	All causes	Typhoid & para-typhoid fever	Small-pox	Measles	Scarlet fever	Whooping cough	Diphtheria	Influenza	Diarrhoea and enteritis under two years	Total deaths under one year	MATERNAL MORTALITY RATE		
														Puerperal sepsis	Other maternal causes	Total
England and Wales	1942	15.8	0.54	11.6	0.00	—	0.01	0.00	0.02	0.05	0.09	5.2	49	0.42	1.59	2.01
	1943	16.5	0.51	12.1	0.00	—	0.02	0.00	0.03	0.03	0.37	5.3	49	0.73	1.56	2.29
	1944	17.6	0.50	11.6	0.00	0.00	0.01	0.00	0.03	0.02	0.12	4.8	46	0.59	1.34	1.93
	1945	16.1	0.46	11.4	0.00	—	0.02	0.00	0.02	0.02	0.08	5.6	46	0.49	1.30	1.79
	1946	19.1	0.53	11.5	0.00	0.00	0.00	0.00	0.02	0.01	0.15	4.4	43	0.31	1.12	1.43
126 County Boroughs and Great Towns, including London	1942	17.3	0.66	13.3	0.00	—	0.02	0.00	0.03	0.06	0.09	7.5	59			
	1943	18.6	0.63	14.2	0.00	—	0.02	0.00	0.03	0.04	0.36	7.9	58			
	1944	20.3	0.64	13.7	0.00	—	0.01	0.00	0.03	0.03	0.10	7.3	52			
	1945	19.1	0.58	13.5	0.00	—	0.02	0.00	0.02	0.02	0.07	7.8	54			
	1946	22.2	0.67	12.7	0.00	0.00	0.01	0.00	0.02	0.01	0.13	6.1	46			
148 Smaller Towns (estimated resident populations 25,000 to 50,000 at Census 1931)	1942	18.4	0.62	12.1	0.00	—	0.01	0.00	0.02	0.04	0.10	4.8	46			
	1943	19.4	0.61	12.7	0.00	—	0.02	0.00	0.03	0.04	0.37	4.4	46			
	1944	20.9	0.61	12.4	0.00	—	0.01	0.00	0.02	0.03	0.11	4.4	44			
	1945	19.2	0.53	12.3	0.00	—	0.02	0.00	0.01	0.02	0.07	4.5	43			
	1946	21.3	0.59	11.7	0.00	0.00	0.00	0.00	0.02	0.01	0.14	2.8	37			
London (Administrative county)	1942	14.0	0.48	13.9	0.00	—	0.01	0.00	0.04	0.02	0.07	8.6	60			
	1943	15.8	0.45	15.0	0.00	—	0.02	0.00	0.03	0.02	0.27	10.4	58			
	1944	15.0	0.42	15.7	0.00	—	0.00	0.00	0.04	0.01	0.08	10.1	61			
	1945	15.7	0.40	13.8	0.00	—	0.01	0.00	0.02	0.01	0.07	7.6	53			
	1946	21.5	0.54	12.7	0.00	—	0.01	0.00	0.02	0.01	0.12	4.2	41			
Rotherham (Adjusted death rates)	1942	18.1	0.73	11.8	0.01	—	—	—	0.09	0.23	0.03	4.6	50	—	0.77	0.77
	1943	18.8	0.55	13.9	—	—	0.04	—	0.06	0.12	0.32	10.7	65	—	3.48	3.48
	1944	23.3	0.66	13.4	—	—	—	—	0.03	0.01	0.08	12.0	60	1.11	1.66	2.77
	1945	20.3	0.82	13.6	—	—	0.01	—	0.03	0.01	0.15	8.4	56	0.61	0.61	1.22
	1946	22.5	0.52	12.6	—	—	—	—	0.01	—	0.09	5.7	51	1.10	0.55	1.65

NOTE : A dash (—) signifies that there were no deaths.

During the year, 139 deaths from cancer took place and details are furnished in the table below of the location of the disease, together with the age and sex distribution :—

Location of disease		Under 15 years		15-25 years		25-35 years		35-45 years		45-55 years		55-65 years		65-75 years		Over 75 years		Total		Grand total
		M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
Buccal cavity and pharynx	M.	—	—	—	—	—	—	—	—	—	—	2	—	—	—	1	—	3	—	4
	F.	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	
Digestive organs and peritoneum	M.	—	—	—	—	1	—	3	—	2	—	11	—	26	—	7	—	50	—	83
	F.	—	—	—	—	—	—	—	2	—	6	—	7	—	13	—	5	—	33	
Respiratory organs	M.	—	—	—	—	—	—	2	—	2	—	—	—	3	—	—	—	7	—	10
	F.	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	—	3	
Uterus	F.	—	—	—	—	—	—	4	—	—	—	2	—	1	—	1	—	8	—	8
Other female genital organs	F.	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	1	—	1
Breast	F.	—	—	—	—	—	—	—	—	5	—	2	—	5	—	4	—	16	—	16
Male genital organs	M.	—	—	—	—	—	—	—	—	1	—	1	—	2	—	—	—	4	—	4
Urinary organs	M.	—	—	—	—	—	—	—	—	2	—	1	—	4	—	1	—	8	—	9
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	
Skin (scrotum excepted)	M.	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Brain and other parts of the nervous system	M.	—	—	—	—	—	—	—	—	1	—	1	—	—	—	—	—	2	—	2
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Other or unspecified organs	M.	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	1	—	1
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
Totals	..	—	—	—	—	1	—	6	6	9	11	16	13	35	21	9	12	76	63	139

The ratio of cancer deaths to deaths from all causes expressed as a percentage for the years 1942-46 is as follows :—

In 1942 the percentage was 12.5; in 1943, 12.5; in 1944, 13.2; in 1945, 14.2; and in 1946, 16.1.

SECTION II.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

DOMICILIARY SERVICES.

PROFESSIONAL NURSING IN THE HOME.

There is no scheme provided by the Local Authority for professional nursing in the home of either (a) general cases or (b) infectious cases.

There are three district nursing associations within the area of the County Borough namely, Rotherham, Greasbrough and Thorpe Hesley. An outlying part of the Borough at Canklow, adjoining the City of Sheffield, is covered by the Tinsley District Nursing Association.

Grants are made to these associations on the condition that their services are available to persons in receipt of public assistance. Grants are also made to the associations within the Borough towards the additional costs involved by the adoption of the Rushcliffe salaries scales, and payments are made to the Greasbrough and Thorpe Hesley associations for the services of their nurse at the child welfare centres.

MIDWIVES.

The report on the midwives practising in the Borough during the year will be found in Section IX.

NATIONAL HEALTH INSURANCE.

No change has occurred in the work of the Local Authority which is administered in co-operation with the National Health Insurance service as commented upon in previous reports.

POOR LAW MEDICAL OUT-RELIEF.

The medical care of persons in receipt of outdoor relief is undertaken by the Medical Services Committee on behalf of the Social Welfare Committee and the whole of the County Borough is regarded as one medical district.

Dr. T. V. Griffith, the Medical Superintendent at the Municipal General Hospital, is designated as District Medical Officer, and an assistant medical officer on his staff has full-time duties dealing with outdoor sick cases. Dr. H. M. Mills also continues his duties in the outlying Scholes and Thorpe districts of the County Borough as formerly.

REMOVAL OF INFIRM OR DISEASED PERSONS.

Section 101 of the Rotherham Corporation Act, 1928, enables the Medical Officer of Health to apply to a court for the removal of an infirm or diseased person to the Social Welfare Institution. Arrangements can also be made for voluntary removal.

During the year, one application was made to the court for a removal order and seven other aged and infirm persons were persuaded to voluntarily enter the institution without orders being obtained.

CLINIC SERVICES.

CLINICS AND TREATMENT CENTRES.

The following is a list of the out-patient departments under the control of the Corporation and provided by them, together with the sessional times, and attendances for 1946 :—

Type of clinic and location	Day and hours of attendance	Cases attending	Attendances 1946
ANTE-NATAL :			
Cranworth Road Centre, Cranworth Road	Tuesday : 2.30—5.0 p.m.	District cases	502
Ferham House Centre, Kimberworth Road	First and third Thursday in the month : 2.30—5.0 p.m.	District cases	360
	Friday : 10.0 a.m.	Municipal General Hospital cases	1042
Greasbrough Centre, Greasbrough Public Hall	Second Wednesday in the month : 2.30—5.0 p.m.	District cases	77
Municipal General Hospital, Moorgate	Mon. and Wed. : 2.0—5.0 p.m.	Hospital cases	3679
Thorpe Hesley Centre, Thorpe Hesley School	Fourth Thursday in the month : 2.30—5.0 p.m.	District cases	33
AURAL :			
Cranworth Road Centre, Cranworth Road	Treatment sessions : Daily, except Sunday: 9 a.m.—12.30 p.m. Consultant's session : Friday : 11 a.m.—1.30 p.m.	School and pre-school children	2952
Ferham House Centre, Kimberworth Road	Treatment sessions : Monday to Friday : 2.0—5.30 p.m. Consultant's session : Monday : 2.0—5.0 p.m.	School and pre-school children	2961
Municipal General Hospital, Moorgate	Consultant's session : Friday : 3.0 p.m.	Hospital cases	52

Type of clinic and location	Day and hours of attendance	Cases attending	Attendances 1946
BIRTH CONTROL :			
Cranworth Road Centre, Cranworth Road	Tuesday : 2.30—5.0 p.m.	Expectant and nursing mothers seeking birth	43
Ferham House Centre, Kimberworth Road	First and third Thurs- day in the month : 2.30—5.0 p.m.	control advice on medical grounds	20
Greasbrough Centre, Greasbrough Public Hall	Second Wednesday in the month : 2.30—5.0 p.m.		2
Thorpe Hesley Centre, Thorpe Hesley School	Fourth Thursday in the month : 2.30—5.0 p.m.		—
CANCER AND RADIUM :			
Municipal General Hospital, Moorgate	Thursday : 2.30 p.m.	Hospital out-patients	1026
CHILD GUIDANCE :			
Ferham House Centre, Kimberworth Road	Wednesday : 9 a.m.—12.30 p.m. 2.0—5.30 p.m.	School children	30
CHILD WELFARE :			
Canklow Centre, Baptist Chapel, Westgate	Tuesday : 2.30—5.0 p.m.	Infants under 1 year	899
Cranworth Road Centre, Cranworth Road	Monday and Friday : 2.30—5.0 p.m.	Children 1—5 years	519
Ferham House Centre, Kimberworth Road	Monday and Friday : 2.30—5.0 p.m.	Infants under 1 year	3323
Greasbrough Centre, Greasbrough Public Hall	First, third and fourth Wed. in the month : 2.30—5.0 p.m.	Children 1—5 years	1670
Thames Street Nursery, Thames Street	First & third Tuesday in the month : 2.30—5.0 p.m.	Infants under 1 year	2553
Thorpe Hesley Centre, Thorpe Hesley School	First and third Thurs- day in the month : 2.30—5.0 p.m.	Children 1—5 years	1884
		Infants under 1 year	532
		Children 1—5 years	479
		Nursery children	
		Infants under 1 year	62
		Children 1—5 years	515
		Infants under 1 year	305
		Children 1—5 years	183
DENTAL :			
Cranworth Road Centre, Cranworth Road	Monday and Tuesday: 2.0—5.30 p.m. Wednesday, Thursday and Friday : 9 a.m.—12.30 p.m. 2.0—5.30 p.m. Saturday : 9 a.m.—12.30 p.m.	School and pre-school children, maternity and tubercular patients	4197

Type of clinic and location	Day and hours of attendance	Cases attending	Attendances 1946
Ferham House Centre, Kimberworth Road	Monday, Thursday and Friday : 9 a.m.—12.30 p.m. 2.0 —5.30 p.m. Tuesday & Saturday : 9 a.m.—12.30 p.m. Wednesday : 2.0 —5.30 p.m.	School and pre-school children, maternity and tubercular patients	3387
Greasbrough Centre, Greasbrough Public Hall	As required	School and pre-school children, maternity and tubercular patients	155
Oakwood Hall Sanatorium, Moorgate	As required	Sanatorium patients	41
Thorpe Hesley Centre, Thorpe Hesley School	As required	School and pre-school children, maternity and tubercular patients	249
DIPHTHERIA IMMUNISATION			
Cranworth Road Centre, Cranworth Road	Thursday : 2.0 —4.15 p.m.	School and pre-school children	Not separately recorded
Ferham House Centre, Kimberworth Road	Wednesday : 2.0 —4.15 p.m.		—
Greasbrough Centre, Greasbrough Public Hall	As required		—
Thorpe Hesley Centre, Thorpe Hesley School	As required		—
DISTRICT OUT-PATIENT :			
Devonshire Street Clinic, Devonshire Street	Daily, except Sunday: 10.0—10.30 a.m.	Social Welfare patients	—
Greasbrough Centre, Greasbrough Public Hall	Wednesday : 9.30 a.m.		—
Municipal General Hospital, Moorgate	Daily, except Sunday: 11.0—11.30 a.m. Monday, Tuesday, Wednesday & Friday: 5.0 —5.30 p.m.		2546
GENERAL OUT-PATIENT :			
Municipal General Hospital, Moorgate	Daily, except Sunday: 10.0 a.m.	Hospital out-patients	4665

Type of clinic and location	Day and hours of attendance	Cases attending	Attendances 1946
GYNAECOLOGICAL : Municipal General Hospital, Moorgate	Monday : 2.30 p.m.	Hospital out-patients	641
MINOR AILMENT : Cranworth Road Centre, Cranworth Road Ferham House Centre, Kimberworth Road	Daily, except Sunday: 9 a.m.—12.30 p.m. Daily, except Saturday afternoon and Sunday : 9 a.m.—12.30 p.m. 2 p.m.—5.30 p.m.	School and pre-school children	12162 10604
Greasbrough Centre, Greasbrough Public Hall Thorpe Hesley Centre Thorpe Hesley School	Monday and Friday : 2.0 —4.0 p.m. Friday : 2.0 —4.0 p.m.		692 377
NERVOUS DISEASES : Municipal General Hospital, Moorgate	Wednesday : 2.30 p.m.	Hospital out-patients	708
OPHTHALMIC : Cranworth Road Centre, Cranworth Road Ferham House Centre, Kimberworth Road	Saturday : 9 a.m.—12.30 p.m. Tuesday : 1.30—3.0 p.m.	School and pre-school children	1369 1226
ORTHOPAEDIC : Cranworth Road Centre, Cranworth Road	Tuesday—by appointment : 2.0 —5.0 p.m. (Approx. 7 sessions per year)	School and pre-school children	158
PAEDIATRIC : Cranworth Road Centre, Cranworth Road	Fourth Tuesday in the month : 11 a.m.—12.30 p.m.	School and pre-school children	67
Municipal General Hospital, Moorgate	Tuesday : 11.0 a.m.	Hospital out-patients	188
PHYSIOTHERAPY : Municipal General Hospital, Moorgate	Monday to Friday : 9 a.m.—5.0 p.m. Saturday : 9 a.m.—1.0 p.m.	Hospital out-patients	6138

Type of clinic and location	Day and hours of attendance	Cases attending	Attendances 1946
POST-NATAL :			
Cranworth Road Centre, Cranworth Road	Tuesday : 2.30—5.0 p.m.	Nursing mothers	48
Ferham House Centre, Kimberworth Road	First and third Thursday in the month : 2.30—5.0 p.m.		46
Greasbrough Centre, Greasbrough Public Hall	Second Wednesday in the month : 2.30—5.0 p.m.		22
Municipal General Hospital, Moorgate	Monday : 2.30 p.m.		78
Thorpe Hesley Centre, Thorpe Hesley School	Fourth Thursday in the month : 2.30—5.0 p.m.		2
REMEDIAL EXERCISES :			
Cranworth Road Centre, Cranworth Road	Monday, Thursday and Friday : 9 a.m.—12.30 p.m. 2.0 —5.30 p.m.	School and pre-school children	5797
Ferham House Centre, Kimberworth Road	Tuesday : 2.0 —5.30 p.m. Wednesday : 9 a.m.—12.30 p.m. Wednesday : 2.0 —5.30 p.m.		1121
RINGWORM :			
Ferham House Centre, Kimberworth Road	Tuesday : 9 a.m.—12.30 p.m.	Diagnostic School and pre-school children	457
SCABIES :			
Ferham House Centre, Kimberworth Road	Monday, Tuesday, Wednesday & Friday : 9.30 a.m.—5.30 p.m. Thursday : 9.30 a.m.—7.30 p.m. Saturday : 9.30 a.m.—12.30 p.m.	Scabietic families	1965
SUNLIGHT :			
Municipal General Hospital, Moorgate	Daily, except Sunday: 9.30 a.m.	Hospital out-patients	285

GENERAL HOSPITALS.—(b) VOLUNTARY.

No meeting of the representatives of the Hospital and the Local Authority was held during the year.

INFECTIOUS DISEASES.

Hospital accommodation for the treatment of cases of infectious disease is provided at the Isolation Hospital, Badsley Moor Lane, Rotherham, and for smallpox at the Kimberworth Hospital, Rotherham. The report of the year's working of these hospitals will be found in Section VI.

TUBERCULOSIS.

Hospital accommodation for the treatment of persons suffering from tuberculosis is provided at the Oakwood Hall Sanatorium, Moorgate, Rotherham, and details of the patients admitted during the year will be found in Section VII of this report.

CANCER.

Special facilities for the treatment of cases of cancer are provided at the Municipal General Hospital. In addition to operative measures, radium and deep x-ray therapy are provided under the direction of a medical consultant from the Sheffield Radium Centre. An outpatient clinic is held weekly at the hospital.

MATERNITY.

Institutional maternity accommodation is provided by the Corporation at the Municipal General Hospital and detailed statistics of the work performed will be found in Section V of this report, which deals with the working of that hospital.

An emergency maternity unit consisting of the Obstetric Officer and his team of midwives with equipment is stationed at the hospital and is available for cases of district midwifery.

During the year, investigations have been made into all maternal deaths occurring in the Borough, and the results of each inquiry have been forwarded to the Chief Medical Officer of the Ministry of Health, or in the case of extra urban deaths, to the responsible authority for the area in which the case was normally resident, for transmission to the Ministry.

All cases of puerperal pyrexia are enquired into by the Obstetric Officer.

MATERNITY AND NURSING HOMES.

No fresh registration of maternity and nursing homes was received during the year.

The registration of one of the maternity homes was varied during the year on account of change of ownership.

It was necessary to draw attention to the poorness of the staffing arrangements at another maternity home and, as a result of this action, a considerable improvement was effected. This home was also registered for the purposes of Child Life Protection under Section 211 of the Public Health Act, 1936, to receive not more than one foster child at any one time.

At the end of 1946, three homes were registered under the provisions of the Public Health Act, 1936, two as maternity homes only and the other as a maternity and nursing home. These were inspected regularly throughout the year.

INSTITUTIONAL PROVISION FOR THE CARE OF MENTAL DEFECTIVES.

No institutional accommodation has been provided for the care of the mental defectives solely for the use of local cases. Rotherham is, however, one of the constituent authorities of the South-West Yorkshire Joint Board for the Mentally Defective, who control the St. Catherine's Certified Institution, Loversall, near Doncaster, and which had at the end of 1946 a total available accommodation of 480 beds.

The occupation of the beds allocated to Rotherham cases is given in detail in Section X of this report. In this section also will be found full detailed particulars of the Rotherham cases in institutions, other than that provided by the joint board.

INSTITUTIONAL PROVISION FOR UNMARRIED MOTHERS, ILLEGITIMATE INFANTS, AND HOMELESS CHILDREN.

There have been no changes in the arrangements for the above as enumerated in the report for 1944.

DAY NURSERIES.

The report of the year's working of the Thames Street Nursery will be found in Section IX. This nursery has accommodation for 80 children by day and 26 by night.

ANCILLARY SERVICES.

CLINICAL LABORATORY.

The clinical laboratory is situated in the grounds of the Municipal General Hospital, Rotherham, and the report on its work will be found in Section XI.

AMBULANCE FACILITIES.

One motor ambulance is used for the removal of cases of infectious disease and is maintained at the Isolation Hospital.

Accidents, non-infectious cases and maternity cases were dealt with by the Borough Ambulance Service.

SECTION III

SANITARY CIRCUMSTANCES OF THE AREA.

WATER.

The following particulars relating to water supplies have been kindly supplied by the Borough Engineer:—

The water supply for the year has been satisfactory in quality and quantity over the whole area and its several parts.

Bacteriological examinations are taken of the raw Ulley water at monthly intervals; chloramine treatment is installed on all supplies, bacteriological examinations of the Ulley and Pinch Mill Spring Water in supply are taken twice weekly. The probable number of coliform organisms per 100 ml. was nil for all samples of water in supply during 1946.

The moorland water supplied to Rotherham by Sheffield Corporation and the Derwent Valley Water Board has been treated for plumbo-solvent action and pH values of water in supply are above neutral.

There has been no evidence of contamination of any form.

No. of houses with piped supply in Rotherham	...	...	...	21,833
No. of houses with piped supply out of Borough and supplied under fringe agreement	...	...	...	259
No. of houses supplied by standpipe out of Borough and supplied under fringe agreement	...	...	...	4
Population supplied	...	...	...	77,700

CHARACTER OF WATER.

The latest reports received from the Public Analyst during 1946 with reference to samples taken from the distribution system were as follow:—

	Langsett water 2/12/46.	Derwent water 2/12/46.	Ulley water 2/12/46.
Physical characters :			
Suspended matter .. .. .	.. Faint trace	Faint trace	None
Appearance of a column 2 ft. long	.. Clear, yellowish	Clear, faintly yellowish	Clear, faintly yellowish
Taste .. .. .	.. Normal	Normal	Normal
Odour .. .. .	.. None	None	None
Chemical examination :		Parts per 100,000.	
Total solids dried at 180°C.	.. .. 11·6	10·0	35·5
Chlorides as chlorine .. .. .	.. 1·20	1·10	2·70

		Langsett water 2/12/46.	Derwent water 2/12/46.	Ulley & Langsett water mixed 2/12/46.
Equivalent to sodium chloride	.. ..	1.98	1.81	4.45
Nitrites	.. ..	None	None	Faint trace
Nitrates as nitrogen	.. ..	0.07	0.55	0.40
Poisonous metals (lead, etc.)	.. ..	None	None	None
Total hardness	.. ..	4.0	3.5	22.0
Temporary hardness	.. ..	1.5	2.0	6.5
Permanent hardness	.. ..	2.5	1.5	15.5
Oxygen absorbed in 4 hours at 80°F.	.. ..	0.302	0.135	0.199
Ammoniacal nitrogen	.. ..	0.0040	0.0006	0.0010
Albuminoid nitrogen	.. ..	0.0072	0.0024	0.0144
pH. value	.. ..	7.2	7.4	7.2
Bacteriological examination				
B. coli test (MacConkey's bile salt lactose broth)				
Probable number of coliform organisms per 100 ml.		0	0	0

REMARKS.

Satisfactory both chemically and bacteriologically.

RIVERS AND STREAMS.

The supervision of rivers and streams in the County Borough rests with the West Riding Rivers Board.

DRAINAGE AND SEWERAGE.

During 1946, there was no material change in the sewerage of the area beyond the extension of the sewers to meet the needs of the housing developments.

By means of a high level and also a low level sewer, the sewage of the greater part of Rotherham is conveyed to the Aldwarke Sewage Works on the banks of the River Don. The method of purification is by the bio-aeration process.

The village of Thorpe Hesley has a separate sewerage system and sprinkler filter, and the sewage from Blackburn is treated at the adjacent disposal works of the City of Sheffield.

The area of Greasbrough drains to an independent disposal works at Scrooby Lane, Greasbrough.

Brinsworth and part of Whiston drain to the Aldwarke Sewage Works. The remaining parts of this area drain to the Rotherham Rural District Council works under arrangement with that authority.

Cesspools exist in the unsewered parts of the district.

CLOSET AND ASHPIT ACCOMMODATION.

During the year one pail closet and three dry ashpits were abolished. Eight trough closets were converted to water closets and seven additional water closets were provided.

The numbers of the following types remained at the end of the year: —

Privies	...	...	...	...	...	...	...	...	171
Trough closets	...	...	...	...	...	...	...	...	37
Pail and chemical closets (attached to dwellings)	...	...	...	...	...	...	...	...	35
Dry ashpits	...	...	...	...	...	...	...	...	15

Of the dry ashpits, nine were in use at chapels or were disused.

PUBLIC CLEANSING.

The cleansing of privies and cesspools, and the removal and disposal of house refuse, are undertaken by the Cleansing Department of the Borough Engineer. The method of disposal is entirely by controlled tipping.

In order to facilitate the provision and maintenance of moveable ashbins power was granted under the Rotherham Corporation Act, 1930, to enable the Corporation to provide and maintain refuse bins. A charge of 9d. per annum was made during 1946 in respect of each premises. From the inception of the scheme in April, 1931, to 31st March, 1947, 28,116 bins have been provided.

The amount of house refuse collected and bins provided or renewed during the year ended 31st March, 1947, were as follow: —

Refuse collected	...	...	...	...	...	...	...	21,152 tons
Bins supplied	...	...	...	...	...	...	...	2,280

SANITARY INSPECTION OF THE AREA.

The following is a summary of the work done by the sanitary inspectors during the year: —

Complaints investigated	..	..	..	..	..	..	531
Miscellaneous inspections and visits	..	..	..	..	..	..	4133
Re-inspections of nuisances	..	..	..	..	..	..	3739
Inspections of work in progress	..	..	..	..	..	..	407
Visits for sanitary alterations	..	..	..	..	..	..	44
Interviews with owners, agents, and builders	..	..	..	..	..	..	656
Inspections of tents, vans, and sheds	..	..	..	..	..	..	12
workshops and factories	..	..	..	..	..	..	284
offensive trades (including fish friers)	..	..	..	..	..	..	98
canal boats	..	..	..	..	..	..	6
cowsheds and dairies	..	..	..	..	..	..	106

common lodging houses (including visits by police inspector)	113
houses let in lodgings	48
premises where made up goods are prepared ..	25
hairdressers' premises	46
Cases of infectious diseases investigated	199
Visits to zymotic contacts	65
Food control visits	266
Drains tested	75
Number of verbal intimations	395
preliminary notices and letters	1582
statutory notices	47
Matters referred to other Departments	148
Samples obtained under Food and Drugs Act	190
Informal milk samples for Gerber test	1
Milk samples for bacteriological examination	101
Visits under Pharmacy and Poisons Acts	14
Proceedings instituted	4
Applications to Court for removal orders (infirm persons) ..	1

Three proceedings were instituted for failure to comply with abatement notices and one was instituted under the Food and Drugs Act.

Number of nuisances abated	1633
------------------------------------	------

HOUSING.

During 1946, 1,419 houses were inspected for structural defects.

The condition of many existing houses is among the many present day problems of Health Departments generally.

Overcrowding can be met by providing additional houses and in Rotherham this is being done as quickly as the circumstances permit. The Borough has a very favourable record in this respect.

The actual condition of existing houses is a matter for concern. During 1946 owing to shortage of materials and skilled labour available for repairs, very little headway was made against the cumulative effects of the lack of maintenance of houses since the end of 1939. The normal lack of maintenance was aggravated by other factors. Rotherham was not seriously damaged by falling bombs but the blast from those that did fall in the Borough and from gunfire weakened numerous house structures so that very little is required to cause roofs to leak and ceilings and plaster to fall.

When considering repairs and reconditioning it must be realised that house structures do reach a stage when repairs are satisfactory to no one. There are houses in Rotherham that have reached that stage.

It was proposed to deal with a number of Clearance Areas during late 1939. The houses involved in those areas have worsened. Other houses have deteriorated and are now considered to be in the unfit category. Much time is being spent in endeavouring to prevent these houses becoming too bad until the time arrives when new houses can be erected to replace them.

Whilst the minimum standard of fitness is somewhat arbitrary, as has been experienced in county courts in the past, the generally accepted standard became higher as slum clearance proceeded during the years following the Housing Act, 1930.

It is not now possible to give a firm figure for the number of houses in the Borough which may be considered unfit as there is a still rising public demand for better housing amenities which is reflected in the Report of the Standards of Fitness for Habitation Sub-Committee of the Central Housing Advisory Committee.

SMOKE ABATEMENT.

There were eight meetings of the Sheffield, Rotherham and District Smoke Abatement Committee held during the year.

Mr. J. H. Hoare, the Rotherham member of the staff, re-commenced his duties in April and regular work was resumed after a lapse of seven years. It was found that conditions at the various works were not as bad as had been anticipated, but that an amount of reconstruction work will be necessary at some of the works before any appreciable improvement can be attained.

A special clause dealing with land leased for light industrial purposes was passed by the Sheffield Corporation, so that the "prior approval" of all heating apparatus is obligatory. It was agreed that similar powers should be sought in Rotherham, and that the Chief Smoke Inspector be asked to advise the Borough Surveyor and the Senior Sanitary Inspector with regard to this work.

Further complaints were received of nuisance caused by dust and fumes from electricity power stations, the reply from the Central Electricity Board with regard to this matter not proving satisfactory, it was resolved to submit a resolution to the Smoke Abatement Conference as follows:—

"That this Conference views with grave concern the menace to health and amenities caused by the emission of smoke, sulphur and grit from certain electricity generating stations and calls on the Ministry of Fuel and Power and the Central Electricity Board to take immediate steps to obviate the nuisance."

A special session at the Conference dealt with "heating installations in new houses" and the position with regard to the Rotherham Borough was submitted, emphasising the increased domestic use of gas by means of the "two part tariff."

Further complaints were received from an oil refinery where lubricating oils were prepared for use. A new arrestment plant was installed to deal with the vapours emitted, which passes these vapours into the existing boiler flues and a much more satisfactory result has been achieved.

A complaint of nuisance caused by the burning of paper containing “glass wool” was investigated, difficulty being experienced in dealing with the fine particles of glass which affected the skin of the workman. By baling this waste paper before sending it to the destructor, this difficulty was obviated.

The following is a summary of the work done in the area during the eight months from April: —

Number of chimneys observed ...	...	...	...	790
Number of minutes smoke emitted ...	...	...	...	1290
Average minutes smoke per 30 minutes observation ...	...	...	...	1.62
Number of Intimation Notices served ...	...	...	...	46
Abatement Notices served ...	...	...	...	31
Works visited ...	...	...	...	96
Complaints received ...	...	...	...	5

The Council approved at their April meeting the following minute: —

“1426—SMOKE ABATEMENT.—The Town Clerk reported that the National Smoke Abatement Society had asked Local Authorities when granting leases, to include covenants designed to restrict the production of smoke, grit and fumes.

Recommended: —That the Town Clerk be instructed to insert suitable provisions for this purpose in leases granted by the Corporation for the erection of non-residential buildings.”

The following table gives in summary form the soot deposit and sulphur absorption records taken at the College of Technology and the soot deposit records at the Oakwood Hall Sanatorium during the year: —

COLLEGE OF TECHNOLOGY.

Month	Soot deposit gauge						Sulphur di-oxide monthly estimations (lead cone)
	Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.			Weight of SO ₃ per 100 sq. cms. grammes.
				Total soluble	Total insoluble	Total solids	
January ..	48·0	0·269	0·316	9·55	11·22	20·76	2·87
February	52·4	0·249	0·276	8·84	9·80	18·63	3·76
March ..	25·8	0·250	0·533	8·87	18·92	27·79	4·45
April ..	22·0	0·183	0·465	6·49	16·53	23·03	2·93
May ..	64·8	0·222	0·333	7·88	11·82	19·70	2·49
June ..	80·0	0·257	0·420	7·35	14·91	22·25	2·67
July ..	82·8	0·182	0·407	6·46	14·44	20·90	2·35
August ..	88·8	0·261	0·429	9·26	15·23	24·49	2·50
September	88·0	0·232	0·340	8·23	12·07	20·30	2·64
October ..	22·8	0·205	0·421	7·28	14·94	22·22	3·24
November	102·4	0·412	0·552	14·62	19·58	34·21	6·11
December	55·1	0·308	0·372	10·93	13·20	24·13	3·75
Average ..	61·1	0·248	0·405	8·81	14·39	23·20	3·31

OAKWOOD HALL SANATORIUM.

Month	Soot deposit gauge.					
	Rainfall m/m's.	Total solids dissolved grams.	Total insoluble matter grams.	Equivalent to tons per square mile.		
				Total soluble	Total insoluble	Total solids
January	53·0	0·141	0·151	4·73	5·06	9·79
February	63·1	0·173	0·131	5·80	4·39	10·19
March	32·0	0·129	0·230	4·33	7·71	12·04
April	27·1	0·185	0·200	6·20	6·70	12·91
May	73·9	0·163	0·199	5·47	6·67	12·14
June	87·4	0·213	0·345	7·14	11·56	18·71
July	71·9	0·164	0·253	5·50	8·48	13·98
August	101·0	0·169	0·271	5·67	9·09	14·75
September	93·8	0·135	0·184	4·56	6·16	10·73
October	27·4	0·083	0·142	2·78	4·76	7·54
November	115·7	0·238	0·206	7·98	6·91	14·89
December	64·4	0·216	0·190	7·24	6·37	13·61
Average	67·6	0·167	0·208	5·62	6·99	12·61

OFFENSIVE TRADES.

There was no change in the number of offensive trades during 1946 and at the end of the year the following were in existence :—

Tripe boilers	2
Gut scrapers	1
Rag and bone dealers	2
Blood driers	1
	<hr/>
	6
	<hr/>

Fish frying, though not scheduled as an offensive trade, is controlled by bye-laws.

The following matters were dealt with and remedied :—

Fish friers :

Lack of cleanliness	5
Cleaning room defects	2
Shop defect	1
Faulty range	1

COMMON LODGING HOUSES.

The two common lodging houses continued in use during the year. A total of 113 visits were paid including visits by the police inspector.

HOUSES LET IN LODGINGS.

At the end of 1946 there were 20 registered houses let in lodgings in the Borough. Forty-eight visits were paid. No special difficulty was experienced. Although some of the lodgers were typical house let in lodgings habitués, most of them were of the type that would prefer a house of their own if they could get one.

TENTS, VANS, SHEDS AND SIMILAR STRUCTURES USED FOR HUMAN HABITATION.

There was no change in the situation relating to these structures. At the end of the year there were six stationary vans and ten fixed huts in use.

FACTORIES.

The number of factories registered at 31st December, 1946, and details of inspections for the purposes of health provisions were as follow:—

	Number on register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities	68	64	2	—
(ii) Factories not included in (i) to which Section 7 applies :				
(a) subject to the Local Authorities (Transfer of Enforcement) Order, 1938	—	—	—	—
(b) Others	248	220	7	—
(iii) Other premises under the Act (excluding out-workers' premises)	1	—	—	—
Total	317	284	9	—

The cases in which defects were found and action taken were as follow : —

	Number of cases in which defects were found				No. of cases in which prosecutions were instituted
	Found	Remedied	Referred		
			To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1)	21	21	—	3	—
Overcrowding (S.2)	—	—	—	—	—
Unreasonable temperature (S.3) ..	—	—	—	—	—
Inadequate ventilation (S.4).. ..	—	—	—	—	—
Ineffective drainage of floors (S.6) ..	—	—	—	—	—
Sanitary conveniences (S.7) :					
(a) Insufficient	1	1	—	1	—
(b) Unsuitable or defective ..	15	11	—	3	—
(c) Not separate for sexes ..	1	—	—	1	—
Other Offences (not including offences relating to homework) ..	5	5	—	—	—
Total	43	38	—	8	—

The five outstanding defects were in the hands of the builder at the end of the year.

CANAL BOATS.

No canal boats have been registered in Rotherham.

Number of canal boats inspected	6
Number of persons on board : Male adults	12
Female adults	—
Children	—
Number of infringements observed	—

DISPOSAL OF THE DEAD.

Apart from earth burial, cremation facilities are available at the City Cemetery, Sheffield. During the year, 32 persons from Rotherham were cremated there as compared with 25 in the previous year.

SCHOOLS.

SCHOOL HYGIENE.

There have been no major works executed in any of the schools in the County Borough during the year.

CO-ORDINATION.

As outlined in previous reports the co-operation between the school health service and the other health activities of the County Borough has been maintained on a close basis throughout the year.

Reference will be found in other parts of this report to special activities where co-operative effort between the various sections are achieving success, as may be instanced in the diphtheria immunisation campaign, the treatment of scabies, hospital treatment of aural cases, dental treatment, and all the facilities for school and pre-school children.

RAG FLOCK ACT.

No flocks are manufactured in the district. No samples were taken.

PUBLIC MORTUARY.

The arrangement whereby the mortuary at the Municipal General Hospital was used as the public mortuary was continued throughout the year and 48 bodies were received there and detained therein for 180 days. The post mortem room was used on 34 occasions.

SHOPS ACT, 1934.

Routine inspections under the Shops Act are carried out by the officers of the Weights and Measures Department, who report to the Department of Health defects relating to ventilation, temperature and sanitary accommodation.

RATS AND MICE (DESTRUCTION) ACT, 1919.

Infested or re-infested premises treated	..	..	..	335
Rats killed	..	..	..	3080
Estimated number of rats poisoned	..	..	..	2331
Poisoned rats picked up	..	..	..	1251

The estimate of the number of rats poisoned is arrived at by a calculation based on the amount of poisoned bait taken. Of the estimated number of rats poisoned, 1,251 poisoned bodies were picked up; these are not included in the figure given for rats killed, which relates to rats killed by methods other than poison.

Fifty-three premises were treated for mice.

There are no constant heavy surface rat infestations in the urban parts of the Borough. The heaviest infestations originated from water courses and there were several invasions of property from agricultural surroundings. A series of minor infestations on hitherto clear premises was traced to a small private tip where bakehouse refuse was being tipped. The tipping of this material was stopped, existing deposit was well covered and the trouble ceased.

ERADICATION OF HOUSEHOLD PESTS.

The following premises were treated for vermin by the Department :—

	Bugs	Other household pests
Council houses	65	38
Private houses	90	38
Other premises	1	11
Total	<u>156</u>	<u>87</u>

D.D.T. preparations were used for bugs throughout the year. Reports were less numerous than during the previous year and fewer “repeat” treatments were necessary. Whilst D.D.T. is undoubtedly proving its value probably the cold weather of last year assisted in making bugs less active. Cockroaches were the most prevalent of the other household pests. D.D.T. preparations and Gammexane were used with good results.

SWIMMING BATHS.

The management of the two public baths in the County Borough and the measures adopted to ensure a satisfactory condition of the water were described in the Annual Report for 1936.

SHELL FISH.

There are no shell-fish beds or layings in the district, and no action has been taken under the Public Health (Shell-fish) Regulations, 1934, or the Public Health (Cleaving of Shell-fish) Act, 1932.

SECTION IV

INSPECTION AND SUPERVISION OF FOOD.

MILK.

The following statement shows the number of milk producers in the Borough and also the number of registered retailers at the end of 1946:—

Registered cow keepers (producers within the Borough)	..	34
Cowkeepers within the Borough retailing their own supplies		18
Retail roundsmen with premises within the Borough	..	15
Retail roundsmen from premises outside the Borough	..	31

Nine licences were issued under Milk (Special Designations) Regulations :—

Tuberculin tested :							
Dealer	..	..	..	..	..	..	1
Supplementary	..	..	..	..	..	..	3
Accredited :							
Producer	..	..	..	..	..	..	1
Supplementary	..	..	..	..	..	..	2
Pasteurised :							
Premises	..	..	..	..	..	..	1
Supplementary	..	..	..	..	..	..	1

One hundred samples of designated milk were procured for bacteriological testing with results as shown below:—

Class of milk	Samples tested	Nature of test	Number of samples	
			Passed	Failed
Tuberculin tested ..	21	Methylene blue	18	2
		Coliform	19	2
Accredited	55	Methylene blue	46	7
		Coliform	42	13
Pasteurised	24	Phosphatase	24	—
		Methylene blue	24	—

NOTE.—In one tuberculin tested sample and two accredited samples, results of the methylene blue tests were not received owing to a mishap in the laboratory.

MEAT.

During 1946, all slaughtering for sale continued under Government control and was centralised at the Public Abattoir. The following figures, supplied by the Markets' Superintendent, give the number of animals slaughtered there during the year:—

Cattle	Calves	Sheep and lambs	Pigs	Total
6,641	999	20,645	952	29,237

In addition to the above, 110 pigs were slaughtered on private premises for home consumption.

The total estimated weight of fresh killed meat and offals condemned during the year was:—

All causes	.. .. .	70 tons 5½ cwts.
Tuberculosis only	.. .. .	42 tons 3½ cwts.

The percentage of animals found to be affected with disease and injuries is given in the following table:—

	Cattle exclud'g cows	Cows	Calves	Sheep and Lambs	Pigs
Number inspected.. .. .	5,148	1,504	999	20,645	1,062
All diseases except tuberculosis :					
Whole carcasses condemned	2	31	22	70	3
Carcasses of which some part or organ was condemned	1114	202	9	1,170	104
Percentage of the number inspected affected with disease other than tuberculosis ..	21·68	15·49	3·10	6·01	10·07
Tuberculosis only :					
Whole carcasses condemned	2	47	6	2	5
Carcasses of which some part or organ was condemned	1236	693	—	4	34
Percentage of the number inspected affected with tuberculosis	24·05	49·20	0·60	0·03	3·67

Of the 1,062 pigs inspected, 952 were seen at the Abattoir and 110 were slaughtered on private premises of self suppliers. Of the 6,652 cattle inspected, 11 were slaughtered elsewhere and taken to the Abattoir for inspection and disposal.

No meat marking was carried out during the year.

The Borough continued to be free from butcher meat stalls, except for a few meat hawkers' vehicles.

OTHER FOOD.

The following table gives details of food other than fresh killed meat, condemned during the year :—

	Number						lbs.
Imported meat	—	—	—	—	—	—	865
Prepared foods	—	—	—	—	—	—	750
Wet fish	—	—	—	—	—	—	1,638
Fruit (fresh and dried)	—	—	—	—	—	—	491
Vegetables	—	—	—	—	—	—	11,200
Groceries	—	—	—	—	—	—	7,357
Eggs	373	—	—	—	—	—	—
Oat cakes, pikelets, pies	4,789	—	—	—	—	—	—
Packet foods	378	—	—	—	—	—	—
Tinned food	2,776	—	—	—	—	—	—
Rabbits	1,140	—	—	—	—	—	—
Bread (loaves)	13,427	—	—	—	—	—	—

FOOD AND DRUGS ACT.

During the year, 190 samples of food and drugs were obtained and submitted to the Public Analyst for examination. Thirteen samples (11.50 per cent.) were reported to be not genuine—these were all milk samples and seven supplies were involved; a statement showing action taken in relation to them is given below :—

Identi- fication mark	Article	Result of analysis			Remarks and action taken
		Milk fat Percentages	Solids not fat	Freezing pt (Hortvet) deg. Cent.	
3528	Milk	3·13	7·90	—0·475	Contained 7 per cent. of added water ; a street sample taken from a producer-retailer. The producer submitted a statement that German prisoners of war (from adjoining fields), were seen rinsing cans in the dairy house, in which the milk was temporarily stored, on the morning the supply was sampled ; in view of the producer's state-ment and record, proceedings were not taken. He was warned.
3554	Milk	3·30	8·32	—0·511	Slightly deficient in milk solids other than milk fat and the freezing point test showed the presence of at least 3 per cent. of added water ; a street sample from a retailer who obtained his supply from a wholesaler ; see Nos. 3560, 3561 and 3563 (below) which were taken when in course of delivery to the retailer of No. 3554.

Identification mark	Article	Result of analysis			Remarks and action taken
		Milk fat Percentages	Solids not fat	Freezing pt (Hortvet) deg. Cent.	
3560	Milk	3·45	8·59	—0·526	The freezing points of these three samples suggest the presence of a small amount of added water ; the wholesalers consigning the milk to Rotherham were communicated with and it was found that the supply had reached them through still another wholesaler ; the supply was again sampled and found genuine.
3561	Milk	3·10	8·38	—0·526	
3563	Milk	3·15	8·39	—0·526	
3589	Milk	3·00	7·62	—0·475	Contained 10·3 per cent. of added water ; a street sample from a retailer ; proceedings were taken and the retailer was fined £2 and 13/1 costs.
3612	Milk	3·50	8·35	—0·526	Contained a small amount of added water probably due to churn being incompletely drained after washing ; two later samples—Nos. 3614 and 3615 (below) showed no added water.
3614	Milk	2·95	8·54	—0·526	These were taken as “ follow-up ” samples to No. 3612 (above) ; they showed no added water but were slightly deficient in milk-fat due to unequal intervals between milking times.
3615	Milk	2·89	8·94		
3652	Milk	2·22	9·07	—0·526	26 per cent. and 25·3 per cent. deficient in milk-fat. The consignment from which these two samples were procured was railed milk in course of delivery ; pilfering by “ dipping-off ” from the churns was suspected and the results of analysis confirmed the suspicions ; the railway company, consignor and consignee were all informed ; there has been no further interference with this supply.
3653	Milk	2·24	9·04		
3655	Milk	2·82	8·62	—0·526	6 per cent. deficient in milk-fat ; a street sample from a producer-retailer ; the milk-fat deficiency was caused by failure to keep the milk mixed during the delivery round ; warning letter to vendor.
3657	Milk	2·86	8·40	—0·549	Slightly deficient in both milk-fat and solids not fat but the freezing point was normal and negatived the presence of added water ; a street sample from a producer retailer ; the milk-fat deficiency was caused by failure to keep the milk mixed during the delivery round ; warning letter to vendor.

Details of all samples examined by the Public Analyst are given in the following table :—

No.	Nature of samples	Genuine		Not reported as genuine		Formal samples	
		Formal	Informal	Formal	Informal	Prosecutions instituted	Penalties including costs
							£ s. d.
	Ammoniated tincture of						
4	quinine	—	4	—	—	—	—
8	Baking powder	—	8	—	—	—	—
3	Camphorated oil ..	—	3	—	—	—	—
6	Coffee	—	6	—	—	—	—
5	Cocoa	—	5	—	—	—	—
10	Flour (self raising) ..	—	10	—	—	—	—
5	Glycerine	—	5	—	—	—	—
5	Ground ginger	—	5	—	—	—	—
5	Liquorice powder	—	5	—	—	—	—
113	Milk	100	—	11	2	1	2 13 1
7	Pearl barley	—	7	—	—	—	—
3	Sausage	—	3	—	—	—	—
4	Semolina.. .. .	—	4	—	—	—	—
8	Vinegar	—	8	—	—	—	—
4	Zinc ointment	—	4	—	—	—	—
190	Totals	100	77	11	2	1	2 13 1

The quarterly average composition of the samples of milk was as follows :—

Period	Percentages.		No. of samples
	Milk-fat	Solids not fat	
1st quarter	3.51	8.68	33
2nd quarter	3.59	8.58	26
3rd quarter	3.56	8.63	11
4th quarter	3.71	8.80	43
The whole year ..	3.59	8.67	113
Requirements of the Sale of Milk Regulations ..	3.00	8.50	—

SECTION V.

MUNICIPAL GENERAL HOSPITAL.

The district served by the hospital remained the same, namely the County Borough of Rotherham and the Rother Valley Public Assistance Area. The latest estimates of population of these are 78,610 and 120,000, making a total population served by the hospital of 198,610.

BEDS.

The beds provided for sick, medical, surgical, childrens' isolation, gynaecological, maternity and mental cases were 376 including 78 cots.

STAFF.

The medical staff consists of the medical superintendent, the deputy medical superintendent, and four resident medical officers, together with the following visiting consultants:—Surgeon; ophthalmic surgeon; thoracic surgeon; obstetrician; ear, nose and throat surgeon; paediatrician; medical officer for cancer and radium, one medical officer for nervous diseases, and visiting anaesthetist.

Dr. G. E. Mould, Nervous Disease Specialist for many years, died on the 15th March, 1946. The nervous disease clinic is conducted by Dr. H. A. Cole from the West Riding Mental Hospital, Sheffield, and Dr. T. V. Griffith, Medical Superintendent of the Municipal General Hospital.

A radiographer and a physio-therapist are on the permanent staff and the sunlight, massage and X-ray departments are in operation daily.

The nursing staff is usually kept up to full strength and efficiency. This position is greatly helped by the hospital being a training school, not only for general nursing but for midwifery (part 2) as well. Owing to the shortage of pupil midwives undertaking part 2 training, it was still necessary to employ assistant nurses in the maternity wards. The staff at the end of the year was 22 trained nurses, 6 pupil midwives, 8 assistant nurses, 68 student nurses (including 4 at Fairfield Preliminary Training School), 6 male attendants and 1 male theatre orderly.

PRELIMINARY TRAINING SCHOOL.

The Preliminary Training School at "Fairfield," Moorgate, Rotherham, was opened at the end of 1946. A qualified Sister Tutor was appointed and four nurses were transferred from the parent hospital to commence their training.

IN-PATIENTS.

Details of in-patients (including Service patients) treated are shown in the following table :—

In-patients (including births)								
Civilian cases	..	..	..	..	..	..	4294	
E.H.S. and Service cases	..	..	..	..	..	..	108	
							—	4402
Deaths	..	..	..	..	..	..	..	303
Discharges	..	..	..	..	..	..	..	4103

OUT-PATIENTS.

The attendances at the out-patient department during the year for the continuation of treatment, emergency treatment, consultation, etc., were as follow :—

Out-patient : hospital	..	..	..	..	..	..	..	4,665
district	..	..	..	..	..	..	..	2,546
Physiotherapy	..	..	..	..	..	..	..	6,138
Sunlight	..	..	..	..	..	..	..	285
Nervous diseases	..	..	..	..	..	..	..	708
Radium and cancer	..	..	..	..	..	..	..	1,026
X-ray	..	..	..	..	..	..	..	1,091
Ear, nose and throat	..	..	..	..	..	..	..	52
Ante-natal : Municipal General Hospital				..	..	..	..	3,679
Ferham House		..	..	..	..	..	..	1,042
Post-natal	..	..	..	..	..	..	..	78
Gynaecological	..	..	..	..	..	..	..	641
Child Welfare	..	..	..	..	..	..	..	188
Total	..	..	..	..	..	..	..	22,139

The out-patient clinics are held as follow :—

Clinic	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
General out-patients	10-0 a.m.	10-0 a.m.	10-0 a.m.	10-0 a.m.	10-0 a.m.	10-0 a.m.
District out-patients	11-0 a.m. 5-0 p.m.	11-0 a.m. 5-0 p.m.	11-0 a.m. 5-0 p.m.	11-0 a.m. —	11-0 a.m. 5-0 p.m.	11-0 a.m. —
Gynaecological and post-natal	2-30 p.m.	—	—	—	—	—
Child welfare	—	11-0 a.m.	—	—	—	—
Nervous disease	—	—	2-30 p.m.	—	—	—
Radium and cancer	—	—	—	2-30 p.m.	—	—
Ante-natal	2-30 p.m.	—	—	—	2-30 p.m.	—
Ear, nose and throat	—	—	—	—	3-0 p.m.	—

MATERNITY.

The following table gives particulars of the maternity cases dealt with during the year :—

1.	Number of maternity beds exclusive of isolation and labour beds	41
2.	Number of beds included in the above which have been allocated to, and reserved for, expectant mothers in need of hospital treatment	4
3.	Number of maternity cases admitted during the year	1077
4.	Number of women treated during the year in the beds shown against item 2, and which are included in item 3	103
5.	Average duration of stay of cases included against item 3..	10 days
6.	Number of cases delivered by :	
	(a) midwives	857
	(b) doctors	90
7.	Number of cases in which medical assistance was sought by the midwife in emergency	259
8.	Number of cases admitted after delivery	27
9.	Number of cases notified as puerperal pyrexia	7
10.	Number of cases of pemphigus neonatorum	—
11.	Number of infants not entirely breast fed while in the institution	38
12.	Number of infants wholly breast fed on leaving the institution	883
13.	Number of cases of ophthalmia neonatorum	3
14.	Number of maternal deaths	5
15.	Number of infant deaths :	
	(i) stillborn	40
	(ii) within 10 days of birth	46

Of the 1,077 maternity cases dealt with during the year, 385 were resident in the area of the West Riding County Council.

Weekly ante-natal clinics were held in conjunction with the maternity ward and also at Ferham House for intending maternity patients. The following table gives details of the cases attending these clinics :—

	Ferham House	Municipal General Hospital
Women attending	159	897
Attendances made	1042	3679

Seventy-seven women attended during the year at the post-natal clinic held at the hospital and made 78 attendances.

An emergency maternity unit consisting of the Obstetric Officer and his team of midwives with equipment is stationed at the hospital and is available for cases of district midwifery.

CANCER.

The number of patients treated at the hospital during the year was 94, and of these 39 died of the disease.

In addition to operative measures, radium and deep x-ray therapy are provided under the direction of a medical consultant from the Sheffield Radium Centre.

1,026 attendances were made by patients at the radium and cancer clinic held each Thursday afternoon at the hospital.

AURAL.

No change occurred in the arrangements for the treatment of aural cases occurring amongst school and pre-school children during the year.

The following table gives details of the cases treated :—

	Admitted	E.N.T. operation		Days in hospital
		performed	not performed	
Pre-school children	77	75	2	93
School children	330	326	4	543
Total ..	407	401	6	636

In addition to the above cases, 11 adult in-patients and 5 children from the area of the West Riding County Council had operative treatment for ear, nose, and throat conditions.

52 attendances were made at the out-patient department during the year.

TUBERCULOSIS.

The total number of cases admitted (County Borough and West Riding areas) were :—

							Males	Females	Total
Pulmonary ..	..	..	..	..	..	..	3	5	8
Non-pulmonary ..	..	..	..	..	..	..	2	5	7
							5	10	15

There were 7 deaths in hospital from tuberculosis, 4 of which were from pulmonary disease and 3 from non-pulmonary causes.

CHILD WELFARE.

A children's clinic was held each Tuesday at 11 a.m. and was attended by Professor A. E. Naish, the consultant paediatrician. Seventy-two children were seen and made 188 attendances. Children in hospital are also seen and advice is given regarding treatment.

Eighty-three infants were born in hospital who weighed 5½lbs. or less at birth, and of these, 9 died during the first 24 hours. 57 were still living at the end of one month after birth.

Eight premature babies born at home were admitted to hospital.

NERVOUS DISEASES CLINIC.

The following report has been submitted by Dr. H. A. Cole of the West Riding of Yorkshire Mental Hospitals Board, who is now in charge of the psychiatric out-patient clinic held on Wednesday afternoons at the Municipal General Hospital.

Total new cases	...	...	...	...	...	...	96
Total attendances	...	...	...	...	...	...	716
Analysis of new cases:							
Anxiety states	...	...	...	...	...	...	38
Psychoses	...	...	...	...	...	...	44
Mental defectives	...	...	...	...	...	...	3
Epileptics	...	...	...	...	...	...	7
Organic nervous disease	...	...	...	...	...	...	4

This clinic was under the charge of Dr. Mould until his death in March, 1946. Dr. Mould had attended for many years and his death was a sad loss.

The relatively high proportion of psychoses is accounted for by the fact that cases are referred for opinion by the hospital.

Treatment of the psychoneurotic was by the usual form of superficial psychotherapy, combined with the use of drugs in suitable cases. This treatment is adequate for the majority of cases who benefit from sympathetic hearing, encouragement and explanation of symptoms. Even so, it frequently requires a number of visits to the clinic before improvement occurs. The treatment of psychoneuroses is a much more time consuming process than that of physical illness and much more time per patient has to be spent. A few acute cases were admitted to the hospital. A short stay in hospital benefits most anxiety states.

Many of the cases were due to environmental difficulties. These cases often required the co-operation of relatives who were asked to attend the clinic. It is interesting to note that housing difficulties were most commonly blamed for the illness, though they were often not the real cause.

The most difficult cases to deal with were those patients of low intelligence who had fallen on illness as a partial solution to their difficulties. These people are very resistant to all forms of psychological treatment and constitute the discouraging side of the psychiatric clinic.

An electro-convulsive apparatus was provided in August and this has proved invaluable in certain cases with depressive symptoms.

Epileptics are fairly numerous at the clinic. The majority of these are not suffering from mental disorder, but the experience of the Medical Officer in the treatment of this disease at Wadsley makes this the most suitable clinic for them to attend. The Hydantoinates which have not previously been used at the clinic have brought about a reduction in fits.

NEW DEVELOPMENTS.

Under the arrangement referred to in last year's report, several cases, both in-patients and out-patients of the hospital were referred during the year to the Thoracic Unit at the City General Hospital, Sheffield, under the care of Mr. Chesterman.

SECTION VI

INFECTIOUS DISEASES GENERALLY.

The prevalence of the infectious diseases notifiable in the County Borough is shown in the following table :—

Disease	1942	1943	1944	1945	1946
Acute anterior polio-myelitis	—	4	—	—	1
Acute polio-encephalitis	—	—	—	—	—
Cerebro-spinal meningitis	10	5	3	7	2
Diphtheria	134	66	48	24	33
Dysentery	1	3	9	10	22
Encephalitis lethargica	—	—	—	—	—
Erysipelas	47	47	17	20	29
Malaria	1	—	1	—	3
Measles	1039	871	50	1466	260
Ophthalmia neonatorum	11	6	10	5	7
Pemphigus neonatorum	2	—	2	1	3
Pneumonia	136	140	89	95	79
Puerperal pyrexia	9	7	7	17	11
Relapsing fever	—	—	—	—	—
Scarlet fever	214	272	270	264	128
Smallpox	—	—	—	—	—
Typhoid and paratyphoid fevers	3	—	—	1	1
Typhus fever	—	—	—	—	—
Whooping cough	174	211	98	303	222
Tuberculosis : respiratory	71	49	36	56	38
other forms	10	8	9	12	6
Totals	1862	1689	649	2281	845

In the subsequent table particulars are given of the incidence of the notifiable infectious diseases during the year, showing age grouping, ward distribution, cases removed to hospital, and total deaths.

ISOLATION HOSPITAL.

The following table shows the number of cases of principal notifiable diseases which were admitted to the Isolation Hospital during the period under review. The figures in brackets represent non-civilian (service) patients who are also included in the main statistics.

Disease	Cases notified during 1946	In hospital 31st Dec. 1945	Admissions 1946	Discharges 1946	Deaths 1946	Remaining in hospital 31st Dec. 1946	Total patient days
Scarlet fever ..	128	10	95	103	—	2	2959
Diphtheria ..	33	4	31	33	—	2	1788
Typhoid fevers ..	1	—	1	1	—	—	60
Cerebro-spinal meningitis ..	2	—	—	—	—	—	—
Other diseases ..	—	—	33 (1)	32 (1)	1	—	687 (17)
Total	—	14	160 (1)	169 (1)	1	4	5485 (17)

Comparative patient-day figures for the various diseases during the past five years are shown below :—

Year	Scarlet fever	Diphtheria	Typhoid fevers	Cerebro-spinal meningitis	Other diseases	Total patient days	Average daily bed occupancy
1942	4255	7304	103	212	1208	13082	35·9
1943	5589	3637	109	55	1317	10707	29·3
1944	4910	2383	—	53	796	8142	22·3
1945	5228	1305	49	138	585	7305	20·0
1946	2959	1788	60	—	687	5485	15·0

The Kimberworth Smallpox Hospital was available for overflow purposes throughout the year but at no time was its use necessary.

GENERAL OBSERVATIONS ON THE PRINCIPAL DISEASES TREATED.

In considering the following notes on the manner in which the notified cases of the principal diseases were dealt with, it should be borne in mind that the figures relate only to civilian notifications of cases occurring within the Borough.

Scarlet Fever.

There was a noticeable decrease in the incidence of scarlet fever in the Borough during 1946—the notifications totalling 128. This is less than half the number of cases which occurred in any of the three preceding years and is the smallest annual total since 1941.

The number of patients treated in the Isolation Hospital was 96; this includes one patient who was also suffering from diphtheria and who has been regarded for statistical purposes in the foregoing tables as a diphtheria patient as this disease was primarily notified. The remaining 32 cases were nursed in their own homes. Generally speaking the disease was of a very mild type and unaccompanied by complications.

No death occurred from this disease during 1946. Indeed there has been no death from scarlet fever in the Borough since 1937 and this fact reinforces the opinion expressed in earlier reports that the hospitalisation of scarlet fever should, in the main, be discontinued and priority given to measles and whooping cough when either disease is complicated by other conditions or if the patient is housed under conditions which preclude proper isolation or nursing facilities.

Diphtheria.

During 1946 the number of notified cases of diphtheria totalled 33. This represents a slight increase over last year and breaks the continuity of the downward trend of incidence of this disease which has been most noticeable since large-scale immunisation has taken place. It is to be noted, however, that 10 of the 33 cases occurred in patients over 15 years of age. In fact there was a minor outbreak (involving 6 nurses and 5 patients) in the Rotherham Hospital so that the slight increase in total numbers in no way reflects unfavourably on the success of immunisation.

One patient was nursed at home and all other notified cases at the Isolation Hospital. There were no deaths from diphtheria during 1946.

Typhoid Fevers.

Only one case of typhoid fever was notified during the year under review. The patient had been on holiday and returned to Rotherham incubating the disease. She was known to have been a contact and, when the disease developed, was admitted to the Isolation Hospital where she made an uneventful recovery.

Cerebro-spinal Fever.

Two cases of cerebro-spinal fever were notified during the year; one was treated at the Rotherham Hospital and the other at the Municipal General Hospital. Both cases recovered.

Other Diseases.

The following table lists the cases admitted to the Isolation Hospital who were classified as "other diseases" after final diagnosis. This category may be divided into roughly two groups :

- (a) Cases of the minor infectious illnesses with complications or where home nursing was impracticable.
- (b) Cases admitted on mistaken diagnoses or patients suffering from diseases thought to be infectious who were admitted for observation.

Adenitis	1	Non-specific enteritis ...	1
Atrophy of liver	1	Pneumonia	1
C.S.F. (not accepted) ...	1	Purpura	1
Diphtheria carriers (not notifiable)	6	Septic throat	1
Dysentery (Sonné)	1	Tonsillitis	8
Gastro-intestinal disturbance	1	Vincent's angina	1
Measles	1	Whooping cough	5
Measles and broncho-pneumonia	1	No apparent disease ...	1
Measles and whooping cough	1	Total	33

KIMBERWORTH HOSPITAL.

No patients were admitted to Kimberworth Hospital during the year.

DIPHTHERIA IMMUNISATION.

No change was made during 1946 in the facilities for immunisation. Fixed clinic sessions were held at Ferham House and Cranworth Road Centres throughout the year and facilities were also available at any Child Welfare or School Clinic Session.

The 1946 campaign was divided into two parts; during June and July there was a concentration of effort to immunise school children and during August and September attention was paid to pre-school children.

Special publicity was started early in June and continued until August. Advertisements appeared in the local press; there were poster and shop-window displays; pamphlets were distributed by health visitors and school nurses; and a film on diphtheria immunisation was shown at four local cinemas.

Senior scholars at schools were given special talks and the parents of every school child were issued with a circular letter advising immunisation where this had not been done and recommending stimulation doses in appropriate cases. The children were immunised on school premises and, with the whole-hearted co-operation of the teaching staff, there was a minimum of disruption of school routine.

For the pre-school children campaign the Superintendent Health Visitor drew up a map on which were marked areas showing a low percentage of immunised children

under 5 years of age. These areas were individually canvassed by health visitors, and a day or so later an ambulance adapted for immunisation toured these districts and offered facilities on the spot. Some areas were re-visited for a second canvas by health visitors a month later. The results of this door-to-door campaign were good, having regard to the type of person at which it was aimed, namely, those who had been advised and re-advised on many previous occasions without response. Without prior canvassing this type of effort would have been a failure.

At the end of the year the position in Rotherham regarding immunisation in relation to child population was as follows:—

Age group	Estimated mid-year population	Immunised at year end	Percentage immunised
Under 5	7140	3033	42.5
5-14 (inclusive)	11960	8401	70.2

In the over 5 group, 2,866 children had received stimulating doses by the year end. This represents 34.1 per cent. of the immunised children in that group.

Seven children who had been completely immunised contracted diphtheria during 1946. All these cases were of a mild type and unaccompanied by complications. No deaths occurred from diphtheria during 1946.

SUPPLY OF DIPHTHERIA ANTITOXIN.

Diphtheria antitoxin in concentrated form is available to medical practitioners on application to the Health Department. This is used mainly for prophylactic purposes pending final diagnosis and removal to hospital if necessary. During the year 30 phials, representing 162,000 units, were issued.

SCABIES.

The scabies treatment clinic at Ferham House continued to function throughout the year, and 855 patients made 1,965 attendances. The following table gives more detail:—

	Cases	Attendances
Pre-school children	118	255
School children	428	1048
Adults	309	662
Total	855	1965

PUBLIC VACCINATION.

The following details are extracted from the annual returns forwarded to the Registrar-General, and relate to those births which were registered during the year 1945.

Number of live births returned in birth lists	..	..	..	1810
Number successfully vaccinated	..	..	..	583
Number insusceptible of vaccination	..	..	..	8
Number of conscientious objectors	..	..	..	956
Number who died unvaccinated	..	..	..	82
Number postponed by medical certificate	..	..	..	—
Number removed to other known districts	..	..	..	58
Number removed to places unknown	..	..	..	19
Number remaining not accounted for	..	..	..	104

The number of persons successfully vaccinated and re-vaccinated at the cost of the rates during the year is shown below :—

	NAME OF VACCINATION DISTRICT OR INSTITUTION				Total
	Rotherham South- East	Rotherham North- West	Rotherham Greas- brough	Municipal General Hospital	
Number of successful primary vaccinations	233	65	7	84	389
Number of successful re-vaccinations	7	—	—	9	16
	240	65	7	93	405

SECTION VII

TUBERCULOSIS.

NEW CASES AND MORTALITY DURING 1946.

NOTIFICATIONS AND DEATHS.—The following table gives details of the number of primary notifications received during the year :—

Pulmonary		Non-pulmonary		Total
Males	Females	Males	Females	
25	13	3	3	44

In addition, the following cases were brought to notice other than by formal notification :—

	Pulmonary	Non-pulmonary
Death returns from local registrars ..	4	1
Transferable deaths from Registrar General	1	1
Posthumous notifications	—	1
Transfers from other areas (other than transferable deaths)	7	1

Particulars of new cases of tuberculosis and of deaths from the disease are given in the following table :—

Age periods Years		New cases*				Deaths			
		Pulmonary		Non-pulmonary		Pulmonary		Non-pulmonary	
		M.	F.	M.	F.	M.	F.	M.	F.
Under 1	..	—	—	—	—	—	—	—	—
1-5	.. ..	—	—	1	1	—	1	—	—
5-10	.. ..	—	—	—	3	—	—	—	—
10-15	.. ..	—	—	—	—	—	—	—	—
15-20	.. ..	—	—	—	—	—	1	—	—
20-25	.. ..	1	6	2	—	1	1	—	—
25-35	.. ..	7	5	—	—	3	4	—	—
35-45	.. ..	4	6	—	—	2	3	—	—
45-55	.. ..	6	1	1	2	2	1	1	1
55-65	.. ..	10	—	—	—	3	1	—	—
65 and upwards	..	4	—	—	—	2	—	—	—
Totals	..	32	18	4	6	13	12	1	1

*Primary notifications, including other new cases which have come to the knowledge of the Medical Officer of Health during the year.

A review of the deaths which occurred during 1946 amongst notified cases of tuberculosis shows the following periods elapsed between notification and death :—

Notification	Pulmonary	Non-pulmonary
After death	—	1
Within 1 month	2	—
1—3 months	3	—
4—6 months	2	—
7—12 months	2	—
1—2 years	3	—
2—3 years	2	—
3—4 years	1	—
4—5 years	1	—
Over 5 years	4	—
From death returns	5	1
Total number of deaths from tuberculosis ..	25	2
Causes other than tuberculosis	6	—

The ratio of non-notified tuberculous deaths to the total tuberculous deaths was 1 in 4. No action was required for cases of wilful neglect or refusal to notify.

REGISTER.—The following cases were removed from the register during the year :—

				Pulmonary		Non-pulmonary		Total
				M.	F.	M.	F.	
Recovery from the disease	..	..		8	10	7	9	34
Death (all causes)	..	..		18	13	1	1	33
Withdrawal of notification (including transfer lost sight of, etc.)	..	..		4	3	—	2	9

Under the Public Health (Tuberculosis) Regulations, 1930, the number of cases of tuberculosis on the register of notifications on the 31st December, 1946, was 416 classified as follows :—

Pulmonary			Non-pulmonary.			Total cases
Males	Females.	Total.	Males.	Females.	Total.	
184	127	311	58	47	105	416

TUBERCULOSIS DISPENSARY.

During the year 503 new cases attended the dispensary, and of these 43 were found to be definitely suffering from tuberculosis. Of these cases 39 were pulmonary, and 23 were found to be sputum positive; the remaining 4 cases were suffering from non-pulmonary disease.

The following table shows the relation between primary notifications and the cases sent to the dispensary and accepted as suffering from tuberculosis :—

				Primary notifications	Accepted cases attending dispensary
Pulmonary	Males ..	..	..	25	24
				13	15
Non-pulmonary ..	Males ..	..	..	3	2
				3	2
				—	—
				44	43
				—	—

The figures for the accepted cases attending the dispensary for the first time include cases who were notified during the previous year and cases transferred in from other areas.

The following table compares the figures for new cases examined at the dispensary during 1946 with those for the preceding years. The figure for the non-tuberculous cases is still above the average, and is due chiefly to examinations performed on behalf of the Medical Recruiting Board under the National Service Acts.

Years			Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1946			43	4	456	503
1945			62	1	420	483
1944			48	7	433	488
1943			42	2	455	499
1942			61	17	385	463
Totals			256	31	2149	2436

The following table gives the figures for new cases and contacts examined during the preceding 5 years (1937-41), compared with the totals of the above table :—

Years			Definitely tuberculous	Doubtfully tuberculous	Non- tuberculous	Total
1942-46			256	31	2149	2436
1937-41			290	28	1294	1612

CONTACTS.—The arrangements for contacts are as enumerated in the report for year 1942.

NON-TUBERCULOUS CONDITIONS.—The following conditions were revealed in the 456 persons found to be non-tuberculous.

No apparent disease	..	..	291	Blood diseases	..	..	..	4
Respiratory diseases	..	..	147	Other non-tuberculous diseases	..			7
Circulatory diseases	..	..	7					

The following return shows the work of the dispensary during the year 1946 :—

Diagnosis	Pulmonary				Non-pulmonary				Total				Grand total
	Adults		Child.		Adults		Child.		Adults		Child.		
	M	F	M	F	M	F	M	F	M	F	M	F	
A.—(1) Number of definite cases of tuberculosis on the dispensary register at 1st January ..	132	92	16	14	16	6	33	32	148	98	49	46	341
(2) Transfers from other authorities	3	3	—	—	—	—	—	1	3	3	—	1	7
(3) Lost sight of cases returned ..	—	—	—	—	—	—	—	—	—	—	—	—	—
B.—Number of new cases diagnosed as tuberculous during the year :—													
(1) Class T.B. minus	9	6	—	—	—	—	—	—	9	6	—	—	15
(2) Class T.B. plus	12	6	—	—	—	—	—	—	12	6	—	—	18
(3) Non-pulmonary	—	—	—	—	2	—	—	1	2	—	—	1	3
C.—Number of cases included in A. and B. written off the dispensary register during the year as :—													
(1) Recovered	5	9	3	1	1	1	6	8	6	10	9	9	34
(2) Dead (all causes)	13	9	—	—	—	—	—	—	13	9	—	—	22
(3) Removed to other areas ..	3	3	1	—	—	1	—	1	3	4	1	1	9
(4) For other reasons	—	—	—	—	—	—	—	—	—	—	—	—	—
D.—Number of definite cases of tuberculosis on the dispensary register at the end of the year	135	86	12	13	17	4	27	25	152	90	39	38	319

Number of attendances at the dispensary (including contacts)	1,059	Number of :—	
		(a) Specimens of sputum, etc., examined	174
Number of consultations with medical practitioners :		(b) X-ray examinations made in connection with dispensary work	650
(a) Personal	—	Number of “ recovered ” cases restored to dispensary register and included in B above ..	—
(b) Otherwise	121		
Number of visits by tuberculosis officer to homes (including personal consultations)	104	Number of “ T.B. plus ” cases on dispensary register on 31st December	127
Number of visits by nurses or health visitors to homes for dispensary purposes (all visits) ..	607		

The following summary shows the clinical condition of all patients at the end of 1946, classified as (a) pulmonary cases and (b) non-pulmonary cases, arranged according to the years in which they first came under public medical treatment.

(a) PULMONARY TUBERCULOSIS

Condition at the time of the last record made during the year to which the return relates	Previous to 1942				1942				1943				1944				1945				1946			
	Class T.B. plus				Class T.B. plus				Class T.B. plus				Class T.B. plus				Class T.B. plus				Class T.B. plus			
	T.B. minus				T.B. minus				T.B. minus				T.B. minus				T.B. minus				T.B. minus			
	Group 1.	Group 2.	Group 3.	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)	Group 1	Group 2	Group 3	Total (Class T.B. plus)
(a) Remaining on dispensary register on 31st December																								
Disease arrested— Adults M. F. Children	21 19 19	3 5 2	9 7 2	15 13 2	3 3 1	2 1 1	1 1 1	3 1 1	2 1 1	3 1 1	3 1 1	3 1 1	2 1 1	10 1 1	2 1 1	2 1 1	3 1 1	11 8 3	7 6 1	11 6 1	11 6 1	1 1 1	1 1 1	1 1 1
Disease not arrested Adults M. F. Children	2 6 1	1 1 1	5 3 1	9 5 1	1 3 1	9 2 1	1 1 1	10 2 1	2 1 1	6 1 1	2 1 1	8 1 1	2 1 1	10 1 1	2 1 1	2 1 1	2 1 1	11 8 3	7 6 1	11 6 1	11 6 1	1 1 1	1 1 1	1 1 1
Condition not ascertained during the year ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Total on dispensary register at 31st December ..	68	10	27	45	10	14	1	16	5	11	2	13	6	3	13	5	21	19	13	1	17	1	18	18
Discharged as recovered Adults M. F. Children	244 181 319	4 4 —	16 6 —	24 13 —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —	— — —
Lost sight of, or otherwise removed from dispensary register	444	20	46	82	1	2	—	3	2	2	—	2	4	—	—	—	1	—	—	—	—	—	—	—
Dead— Adults M. F. Children	122 62 16	21 6 2	114 61 4	239 137 13	5 1 —	8 3 —	4 3 2	12 6 2	4 3 —	4 2 —	3 3 —	7 5 —	3 2 1	— — —	2 1 1	2 1 1	4 1 1	4 1 —	3 — —	3 — —	1 — —	1 — —	1 — —	1 — —
Total written off dispensary register ..	1388	57	247	508	7	13	9	23	9	8	6	14	10	—	2	4	6	6	3	3	—	1	1	2
GRAND TOTALS ..	1456	67	274	553	17	27	10	39	14	19	8	27	16	3	15	9	27	25	16	6	18	2	20	20

(a) Remaining on dispensary register on 31st December

(b) Not now on dispensary register and reasons for removal therefrom

(b) NON-PULMONARY TUBERCULOSIS

Condition at the time of the last record made during the year to which the return relates	Previous to 1942					1942					1943					1944					1945					1946				
	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total	Bones and joints	Abdominal	Other organs	Peripheral glands	Total					
(a) Remaining on dispensary register on 31st December	2	1	2	1	4	4	1	2	1	3	1	1	1	1	2	1	1	1	1	2	1	1	1	1	2					
	11	5	1	12	29	3	3	1	3	6	1	1	1	1	2	1	1	1	1	2	1	1	1	1	2					
					
					
(b) Not now on dispensary register and reasons for removal therefrom	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
					
					
					
GRAND TOTALS of (a) and (b) (excluding those transferred to pulmonary)	130	47	32	200	409	3	4	3	10	7	1	2	4	2	10	2	4	3	8	1	2	2	3	1	3					
					
					
					

TUBERCULOSIS ALLOWANCES.

No change was made during the year in the administration of the scheme of allowances authorised by Memo 266/T.

Twenty patients were in receipt of allowances granted in previous years, and 20 patients were granted maintenance allowances during 1946. The following summary gives the reasons for the discontinuance of allowances during the year:—

Commenced work	..	..	..	..	..	..	..	5
Died	..	..	..	..	..	..	..	2
Ceased on maximum period of allowances					..	..	..	9
Observation case, non-tuberculous	..	..	..	..	..	..	..	1
Refused further treatment	..	..	..	..	..	..	..	2
Re-admitted to Sanatorium	..	..	..	..	..	..	..	2
Removed from area	..	..	..	..	..	..	..	1
								<hr/> 22 <hr/>

Eighteen patients were in receipt of maintenance allowances at the end of the year.

Of the patients detailed above, four were also receiving discretionary allowances when the year began, all of these being for insurance payments and one also had an excess rent allowance in addition. Six applications were dealt with during the year of which three were for insurance payments only; the fourth application was for excess rent allowance and insurance payments; the fifth was for hire purchase and insurance payments; and the sixth was for excess rent only. Two discretionary allowances ceased when the patients died; one ceased when the patient recommenced work; and another patient's discretionary allowance ceased following his discharge from sanatorium after observation when he was found to be non-tubercular.

The five discretionary allowances being paid at the end of the year were in respect of insurance payments in all cases, two of which also received an excess rent allowance in addition and another case received an allowance for hire purchase payments.

No special payments were made during the year, as the need of the cases was met by grants from accrued national health benefits.

The amount of allowances paid during the year were:—

						£	s.	d.
Maintenance allowances	..	..	..	..	..	1,619	4	3
Discretionary allowances	..	..	..	..	..	62	1	5
Special payments	..	..	..	..	..	—	—	—
Total	..	..	..	..	..	1,681	5	8

DENTAL TREATMENT.

The scheme of dental treatment provided by the Corporation remains unchanged.

Details of the work performed by the Dental Officers in 1946 in respect of tuberculous patients are as follow:—

Individuals treated	..	..	..	..	..	..	..	19
Attendances made	..	..	..	..	..	..	..	57
Extractions	Permanent teeth	..	..	..	..	..	..	70
	Temporary teeth	..	..	..	..	..	..	1
Fillings	Permanent teeth	..	..	..	..	..	..	6
	Temporary teeth	..	..	..	..	..	..	—
Anaesthetics	Local	..	..	..	..	..	..	18
	General	..	..	..	..	..	..	4
Other operations	..	..	..	..	..	..	..	34
Patients supplied with dentures	..	..	..	..	..	..	..	4

OAKWOOD HALL SANATORIUM.

It is a matter of great regret to have to report once again that during this year no real headway has been made in the way of necessary structural alterations. Only the most urgent repair works and renewals have been tackled. This is not on account of financial considerations but owing to lack of labour and materials in the building and allied trades. Until these matters are attended to, the sanatorium is deprived of many advantages including any possibility of affiliation to a training school.

The bed occupancy remains at a low level and while on occasions the staff has been rather generous for two wards, there has never been any prospect of opening the third ward of 32 beds.

The following table shows the percentage bed occupancy of the sanatorium during the year :—

Quarter	Patients from			Total
	Rotherham	Yorkshire W.R.	Other areas	
March	26·1	24·2	8·3	58·6
June	28·6	26·2	8·1	62·9
September ..	28·6	22·1	6·4	57·1
December	33·7	17·7	6·0	57·4
Total 1946 ..	29·3	22·5	7·2	59·0
Total 1945 ..	42·4	26·0	9·9	78·3

ADMISSIONS AND DISCHARGES.—The following table gives details of the number of patients admitted and discharged during the year from the County Borough, and the several authorities renting beds in the sanatorium :—

Authority	Remaining in 1/1/46	Admitted	Discharged	Died	Remaining in 31/12/46
Rotherham C.B.	29	56	46	4	35
Yorkshire W.R.C.C. ..	18	36	29	8	17
Blackpool C.B.	1	—	—	—	1
West Hartlepool C.B. ..	5	—	5	—	—
Hull C.B.	2	3	2	—	3
Oxford C.B.	1	—	1	—	—
Dewsbury C.B.	—	2	1	—	1
Total	56	97	84	12	57

Details of the Rotherham patients treated in the sanatorium during the year are given in the following table:—

Number of patients in hospital.					1/1/46	Admitted	Dis- charged	Died	31/12/46		
Obser- vation cases	Adults	M.	..	1	7	6	—	2			
		F.	..	—	2	2	—	—			
	Children	..	..	—	4	2	—	2	
Total					1	13	10	—	4
Pul- monary cases	Adults	M.	..	9	22	16	4	11			
		F.	..	10	18	15	—	13			
	Children	..	..	—	—	—	—	—	
Total					19	40	31	4	24
Non- pulmon- ary cases	Adults	M.	..	2	2	3	—	1			
		F.	..	1	—	1	—	—			
	Children	..	..	6	1	1	—	6	
Total					9	3	5	—	7
Grand total					..		29	56	46	4	35

The following table gives particulars of the observation cases admitted to the sanatorium during the year:—

Diagnosis on discharge from observation	For pulmonary tuberculosis						For non-pulmonary tuberculosis						Totals		
	Stay under 4 weeks			Stay over 4 weeks			Stay under 4 weeks			Stay over 4 weeks					
	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch
Tuberculous ..	—	—	—	4	—	—	—	—	—	—	—	—	4	—	—
Non-tuberculous ..	—	—	—	2	2	1	—	—	—	—	—	1	2	2	2
Doubtful	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals ..	—	—	—	6	2	1	—	—	—	—	—	1	6	2	2

The immediate results of the treatment of definitely tuberculous patients discharged from the sanatorium during the year are given in the following table:—

Classification on admission to the institution			Condition at time of discharge	Duration of residential treatment in the institution												Grand totals			
				Over 28 days and under 3 months			3—6 months			6—12 months			More than 12 months				Totals		
				M	F	Ch	M	F	Ch	M	F	Ch	M	F	Ch		M	F	Ch
PULMONARY TUBERCULOSIS.	Class TB minus	Quiescent ..	—	—	—	2	—	—	1	1	—	—	—	—	3	1	—	4	
		Not quiescent ..	—	3	—	2	2	—	—	—	—	—	—	—	2	5	—	7	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Class TB plus Group 1	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	1	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Class TB plus Group 2	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	2	1	—	1	—	—	3	3	—	—	1	—	6	5	—	11	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Class TB plus Group 3	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	1	—	—	—	2	—	2	—	—	3	2	—	5	
		Died in institution	—	—	—	1	—	—	—	—	—	1	—	—	2	—	—	2	
	Totals (pulmonary)			2	4	—	7	2	—	4	6	—	3	2	—	16	14	—	30
NON-PULMONARY TUBERCULOSIS.	Bones and joints	Quiescent ..	—	—	—	—	—	—	—	—	—	1	—	—	1	—	—	1	
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	1	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Abdominal	Quiescent ..	—	—	—	1	—	—	—	1	—	—	—	—	1	1	—	2	
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Other organs	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Peri-pheral glands	Quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Not quiescent ..	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
		Died in institution	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
	Totals (non-pulmonary)			—	—	—	2	—	—	—	1	—	1	—	1	3	1	1	5

In addition to the patients dealt with in the above table there were three pulmonary cases discharged, and two pulmonary cases died in sanatorium within 28 days of admission.

GENERAL TREATMENT.—The general principles of treatment employed have been described in previous reports and remain unaltered.

As anticipated in last year's report the arrangement made with the Sheffield Corporation for the surgical treatment of thoracic cases at the City General Hospital, Sheffield, has proved a great help and is working very smoothly.

Arrangements were completed towards the end of the year for the services of the Ear, Nose and Throat Surgeon attached to the other sections of the Health Department to pay visits to the sanatorium at approximately monthly intervals to advise on the cases within his field.

The occupational therapy class meets four afternoons each week and is popular with most of the patients. In spite of the granting of the necessary permits, difficulty is sometimes experienced in obtaining materials such as leather, canvas and wool.

RECREATION.—The usual unofficial games of billiards, cards, etc., have been played and it has also been possible to organise a small whist drive at least once a month, the prizes for which are provided by the Tuberculosis Care Committee. Concerts and orchestral entertainments have been arranged as in previous years.

LIBRARY.—The library is still well used, although some difficulty is experienced in obtaining in sufficient number the type of book which appeals to patients. In addition to books obtained from the Public Library, gifts of books have been received from the British Red Cross Society.

MUNICIPAL GENERAL HOSPITAL.

No beds are specifically allocated for the treatment of tuberculosis in the hospital. Details of the cases treated will be found in Section V of this report.

TUBERCULOSIS CARE COMMITTEE.

The Committee's schemes of assistance by extra nourishment, clothing and dentures have all continued to function during the year. Extra nourishment in the form of milk, meat, eggs, fresh vegetables and groceries was granted to only two patients and amounted to:—

Milk	..	..	..	..	..	..	91½ galls
Egg grants	..	..	..	..	..	..	52
Meat grants	..	..	..	..	..	..	52
Grocery and vegetable grants	..	..	..	..	..	..	52

Nine grants of assistance to patients were made during the year including financial assistance, bedding, clothing and underclothing.

The Committee were able to re-open their car parks scheme on 11th March and four ex-sanatorium patients were employed at the Corporation Street and Crofts Car Parks which were open daily except Sundays from 9 a.m. to 10 p.m. The men worked a five-and-a-half day week of thirty-nine hours.

Towards the end of the year, it was found practicable to employ a fifth attendant owing to the success of the scheme. As from 1st September, 1946, the occupation of Car Park Attendant became a reserved occupation under the Disabled Persons (General Amendment) Regulations, 1946, and all the men employed complied with the requirements of these regulations.

Special grants were made during the Christmas period to persons in receipt of assistance from this Committee, and also those borough patients granted leave from the sanatorium. The arrangement with the Social Welfare Committee whereby the Tuberculosis Officer's certificate was accepted for grants of extra medical necessities to patients in receipt of assistance by that Committee was continued as in previous years.

The Committee again participated in the Christmas Seal Sale organised by the National Association for the Prevention of Tuberculosis. This effort, as in past years, provided the Committee with sufficient funds to carry out its work.

SECTION VIII

VENEREAL DISEASES.

It was noted during 1945 that continuity of anti-syphilitic treatment was interrupted too frequently by reason of the number of public holidays occurring on Tuesdays, and it was decided to change the male medical sessions from Tuesday to Wednesday. The amended time-table (as published in Section II of this report) was put into operation in the first week of February, 1946.

The following table gives a summary of the total patients attending, the diseases treated and the number of attendances made during the past five years:—

	1942	1943	1944	1945	1946
Number of persons attending who were suffering from :					
Syphilis	249 (29)	306 (22)	319 (9)	316 (8)	362 (7)
Soft sore	—	—	—	—	—
Gonorrhoea	146 (32)	133 (7)	128 (1)	145 (15)	185 (7)
Conditions other than venereal	183 (21)	314 (5)	299 (1)	276 (14)	347 (11)
Totals	578 (82)	753 (34)	746 (11)	737 (37)	894 (25)
Out-patient attendances :					
To see medical officer ..	5192 (300)	6379 (88)	6172 (26)	5086 (97)	5351 (43)
For intermediate treatment ..	1763 (135)	1598 (41)	1181 (20)	1304 (72)	1668 (41)
Totals	6955 (435)	7977 (129)	7353 (46)	6390 (169)	7019 (84)
In-patients :					
Patients admitted to hospital	7	6	4	11	11
Total in-patient days	236	91	61	106	135

(Figures given in brackets refer to Service cases treated and these are included in the individual totals.)

There was a marked increase in the number of persons attending for the first time at the Treatment Centre during the year under review; although the proportion of patients suffering from the three main conditions treated (syphilis, gonorrhoea and non-venereal conditions) has remained fairly constant, as will be seen from the following table:—

	1942	1943	1944	1945	1946
New cases during year :					
Syphilis	58 (21%)	87 (20%)	61 (15%)	47 (12%)	91 (18%)
Gonorrhoea	54 (19%)	61 (14%)	70 (18%)	92 (23%)	109 (21%)
Conditions other than venereal	166 (60%)	297 (60%)	264 (67%)	289 (65%)	319 (61%)
Totals	278	445	395	398	519
Total attendances :					
Syphilis	4057 (58%)	5058 (63%)	4969 (67%)	3952 (62%)	4228 (60%)
Gonorrhoea	1838 (27%)	1609 (20%)	1302 (18%)	1386 (22%)	1569 (22%)
Conditions other than venereal..	1060 (15%)	1310 (17%)	1082 (15%)	1052 (16%)	1222 (18%)
Totals	6955	7977	7353	6390	7019

Total attendances were greater than last year but again the percentages, as between the three conditions, have been practically unchanged. It will be noted that more than 60 per cent. of patients attending the Treatment Centre for the first time were found to be suffering from non-venereal conditions. This is probably due to a more enlightened attitude towards venereal disease which has been encouraged by press publicity, etc.

INDIVIDUAL DISEASES.

SYPHILIS.

The following table gives the number of new cases of early syphilis dealt with at the clinic in each of the past five years :—

	1942		1943		1944		1945		1946	
	M	F	M	F	M	F	M	F	M	F
Primary	10 (3)	5	16	2	10	2	17 (2)	3	12 (3)	1
Secondary	3 (1)	2	3	15	3	12	4 (1)	4	5 (2)	6
Latent in first year of infection ..	2 (2)	2	5	13	—	5	1	5	1	7
	15 (6)	9	24	30	13	19	22 (3)	12	18 (5)	14
	24 (6)		54		32		34 (3)		32 (5)	

(Figures given in brackets refer to Service cases treated and these are included in the individual totals).

The number of new cases of early syphilis remains almost unaltered over the past three years. It is regrettable to note that so many female patients delay investigation of their condition until the secondary or later stages have been reached.

During the year under review penicillin became more freely available for the treatment of venereal disease. Soluble penicillin was used during the first few months of the year in the treatment of syphilis—the patient being admitted to hospital and given a dosage of 40,000 units every three hours for 60 injections, a total of 2,400,000 units given in $7\frac{1}{2}$ days.

The advent of penicillin in arachis oil and beeswax allowed early cases of syphilis to be treated as out-patients, since this preparation can be given once daily and probably exerts as prolonged a therapeutic effect as 8 injections of the ordinary soluble penicillin given at three-hourly intervals. This preparation was difficult to manipulate owing to its high viscosity; later preparations (penicillin in beeswax and ethyl oleate) proved more satisfactory.

The treatment of syphilis with penicillin is still in the experimental stage. At this clinic its use has been practically confined to cases of early syphilis. The routine scheme of treatment has been to give an intra-muscular injection of 600,000 units each day for five successive days—a total dosage of 3,000,000 units. Thereafter, a first course of concurrent arsenic and bismuth has been given, after which the patient has a blood test. If the Wassermann and Kahn reactions are then negative the patient is put on observation and routine blood tests after one month, two months and then at three-monthly intervals. In the event of the blood tests being positive a further course (or courses) of arsenic and bismuth is administered.

It is still too early to assess the results of treatment. During the year 32 male and 14 female early syphilitics have been treated with penicillin.

Two men were seen who had been treated in the army with penicillin only for early syphilis and who appeared to have active syphilis again. Whether these cases were relapses or re-infections it was not possible to say, but both admitted to re-exposure to infection.

No evidence has been adduced regarding the prolongation of the incubation period of syphilis in patients with dual infections and whose gonorrhoea had been treated at an earlier date with penicillin. One male patient who was so treated never developed any clinical signs of syphilis, but his serological reactions became positive.

ANTE-NATAL CASES.

The following table shows the results of routine blood tests for syphilis in patients attending the ante-natal clinics during 1946 :—

Blood examined	..	..	..	..	..	..	..	69
Cases in which the blood showed :—								
	WR++	Kahn ++		..	..	..		1
	WR —	Kahn +	}					
or	WR +	Kahn —		..	..	..		3
or	WR \pm	Kahn —						
or	WR —	Kahn \pm						

It is to be regretted that the number of routine blood tests performed in respect of pregnant women has fallen sharply. The only case found to have positive reactions was persuaded to attend the clinic for treatment.

TOXIC COMPLICATIONS OF ARSENIC TREATMENT.

During the year under review there were no cases of jaundice. Fewer patients were on high arsenic dosage, but this good result is probably attributable to the revised technique of sterilising syringes and needles that has been followed at the clinic. There were three mild cases of arsenical dermatitis during the year.

GONORRHOEA.

There was again an increase in the number of new patients attending during 1946 for the treatment of gonorrhoea. During the past five years this figure has been rising steadily as will be seen from the table relating to new cases.

All cases of gonorrhoea have been treated with penicillin. A total of 37 males and 9 females were each given 5 injections at 2-hourly intervals of 30,000 units of soluble penicillin and 52 males and 11 females were treated with a single injection of from 187,500 to 200,000 units of penicillin in oil-wax suspension. The results have been excellent. Eight of the 89 males treated relapsed after the first course and all responded to a further single injection of 375,000 units of penicillin in oil-wax suspension. No female relapses were observed. All patients treated for gonorrhoea with penicillin were tested as far as possible for cure and observed for six months before being finally discharged.

NON-VENEREAL DISEASES.

The number of cases of non-venereal disease attending the clinic remains at a high level. This is a healthy sign and points to the fact that patients are reporting in greater numbers for investigation of conditions which may be venereal in character.

REGULATION 33B AND CONTACT TRACING.

The following table shows the results for 1946 and refers to patients residing within the Borough:—

	Males	Females
(1) Total number in respect of whom Form I was received ..	1	7
Number included above transferred from other areas	—	3
(2) Number of cases in (1) in which attempts were made outside the scope of the regulation to persuade the contact to be examined before the latter had been named on a second Form I		
(a) Contacts found	—	5
(b) Contacts examined or already under treatment ..	—	3
(3) (a) Number of those in (1) in respect of whom two or more Forms I were received	—	1
(b) Number included in (3) (a) in respect of whom the first Form I was previously reported under (1)	—	—
(c) Number included in (3) (a) transferred from other areas ..	—	1
(4) Number of those in (3) (a) who were :		
(a) Found	—	1
(b) Examined after persuasion or already under treatment ..	—	1
(c) Served with Form II	—	—
(d) Examined after service of Form II	—	—
(e) Prosecuted for failure :		
(i) To attend for, and submit to medical examination	—	—
(ii) To submit to and continue treatment	—	—
(f) Transferred to other areas	—	1

During the year slightly more contacts have been located under this regulation than in 1945. On the other hand 14 cases of syphilis, 14 cases of gonorrhoea and 36 non-venereal cases were brought under treatment by the persuasive efforts of the original patients.

A health visitor/social worker was appointed to the staff of the Health Department in April, 1946, and her duties have included the tracing of females named under Regulation 33B and the follow-up of known female patients and children who had been under treatment but who had defaulted in their attendances. During the year the social worker made 103 visits, 38 of which were ineffective. As a result of her efforts 5 females who had been once-named under Regulation 33B were traced and persuaded to attend the Clinic for investigation and 1 twice-named contact was traced and persuaded to attend voluntarily. As regards defaulters, since taking up her duties in April, the social worker was successful in securing the continuation of treatment of 17 female defaulters and was unsuccessful in 5 cases. In 4 cases it was ascertained that the patients had removed to unknown addresses.

The experience of the Department is that the success of the three methods available for securing the attendance of contacts are, in descending order, as follows:—

- (1) The utilisation of the persuasive efforts of the patient in securing the attendance of his or her contact.
- (2) The personal approach by the social worker (females and children only).
- (3) Legal powers under Regulation 33B.

PATHOLOGY.

The pathological work performed during 1946 in connection with venereal disease is summarised in the following table:—

Examinations of pathological material	MICROSCOPICAL for detection of		CULTURAL for detection of	SEROLOGICAL			Other tests
	Spiroch- aetes	Gonococci, trichomonas vaginalis, or other organisms	Gonococci	Wasser- mann or Kahn reaction	Wasser- mann and Kahn reaction	Gono- coccal comple- ment fixation test	
Specimens from persons attending at the treatment centre which were examined at the centre	14	965	—	—	—	—	—
Specimens from persons attending at the treatment centre which were examined at the							
Rotherham laboratory	—	—	—	—	—	—	—
Sheffield University	—	—	—	14	1095	93	—
Specimens from persons in hospitals and from private practitioners' patients which were examined at the							
Rotherham laboratory	—	112	4	—	—	—	1
Sheffield University	—	—	—	12	277	5	—

SECTION IX

MATERNITY AND CHILD WELFARE.

MIDWIVES.

During 1946, the maternity services of the area dealt with 2,153 confinements of which 804 took place within the homes of the people.

Private practice remained constant at 20 per cent of the total confinements.

The following table gives the analysis of the midwifery practice within the area :—

Number of midwives practising at the end of the year in the area of the Local Supervising Authority :				Number of cases in the area attended during the year by midwives			
				Domiciliary cases		Institutional cases	
				Midwifery	Maternity	Midwifery	Maternity
Employed by the Council as :							
domiciliary midwives	11			575	146	—	—
institutional midwives	8			—	—	947	—
Employed by voluntary associations as :							
domiciliary midwives	2			45	6	—	—
institutional midwives	3			—	—	—	6
In private practice as :							
domiciliary midwives	2			5	27	—	—
institutional midwives	5			—	—	104	292
Total	31			625	179	1051	298

During the year, 43 midwives notified their intention to practise midwifery within the area of the Local Supervising Authority. Of these, 17 were on the staff of the Corporation's domiciliary service; 9 were in private practice—7 within maternity and nursing homes; 2 were district nurses employed by the district nursing associations undertaking midwifery by agreement for the local authority; and 15 were on the staff of the maternity department of the Municipal General Hospital. In addition 3 midwives on the staff of the voluntary general hospital acted as maternity nurses to 6 cases of obstetric emergency admitted to hospital during the year.

Supervision of mode of practice, and of the nursing technique of midwives was exercised by the Obstetric Officer and the Superintendent Midwife; lay administration and co-ordination with the health visiting and clinic services being conducted by the Superintendent Health Visitor. No penal action was necessary.

Staff changes, and leave of absence on account of pregnancy and illness, caused disruption in the domiciliary service with resultant interruption in the continuity of the midwife/patient relationship, which continuity is a basic factor in the successful operation of the domiciliary scheme.

The Superintendent Midwife was off duty from the 5th November, 1945, to the 23rd April, 1946. Her duties were carried out by the deputy, and no relief midwife was employed to counterbalance the staff deficiency entailed by her absence.

One domiciliary midwife was allowed leave of absence from January on account of pregnancy and she had not returned to duty at the end of the year.

Two domiciliary midwives were suspended from duty owing to their liability to be a source of infection. One was suspended for 17 days and the other, who had contracted a septic finger which necessitated partial amputation, was off duty from the 25th January to the 23rd September.

During the year, four domiciliary midwives resigned, one was given notice to terminate her temporary employment and four new appointments were made.

Six of the domiciliary midwives are qualified to administer analgesics and these midwives were supplied with the necessary apparatus towards the close of the year. Thereafter, analgesics were administered by them in twenty-one cases.

Facilities for the training of the remainder of the domiciliary midwives will be made when an anaesthetist has been appointed to the staff of the Municipal General Hospital. An approach to the Jessop Hospital, Sheffield, was made during the year, but that hospital was unable to accept the midwives for training. The necessary apparatus for the use of all domiciliary midwives has, however, been obtained and will be issued as the midwives qualify.

There has been an increase in the establishment of the domiciliary service by the appointment of a relief nurse/midwife to undertake relief duties at Greasbrough and Thorpe, and to devote the remainder of her time to general relief duties in the urban area.

The Rushcliffe Midwives Salaries Committee's recommendations for domiciliary midwives are fully implemented with the one exception of basic rent.

During the year a midwife was housed in the newly developing housing estate, and this letting makes the fifth tied tenancy in the domiciliary service.

The area distribution of cases taken by the domiciliary midwives is summarised below: —

Year	Eastdene	Canklow	Eastwood and Cranworth	St. Ann's	Broom and Herringthorpe	Bradgate	Masborough and Thornhill	Meadowbank	Clifton	Thorpe D.N.A.	Greasbrough D.N.A.	Total
1946 ..	78	80	78	90	78	70	110	84	53	24	27	772

The Eastwood-Cranworth midwife is now housed on the post-war housing site on the Rotherham-Dalton boundary, but she does not attend cases outside the area of the Rotherham Supervising Authority.

In May, the Rotherham District Nursing Association were approached following the decision of the Medical Services Committee that, in view of the risk of infection of women being confined if the district midwives attended cases of abortion, wherever possible, the treatment of cases should not be undertaken by the midwives but by the district nurses. This was agreed to as it was on the lines of the previous arrangements made with the Nursing Association whereby the majority of suspected infections in lying-in women have been undertaken by them. In view of the added duties occasioned by this request, the Corporation increased its annual grant to the Association to £250 in respect of the nursing visits of a public health and social welfare nature.

The Council also approved the principle of not recovering from the patient's parents the doctor's fee charged under the Midwives Act, 1918, in cases of suspected or confirmed pemphigus neonatorum, in order to assist prompt action where suspicion is slight in view of the high infectivity of this disease.

DISTRICT ANTE-NATAL CLINICS.

There is no change to report in the conduct, scope and staffing of these clinics which are all under the personal control of the Obstetric Officer.

The following table gives the comparative attendance at the four district ante-natal clinics :—

Centre	Sessions held	New cases attending for the first time			Total number of women attending			Total attendances			Average attendance per session
		Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control	Ante-natal	Post-natal	Birth control	
Ferham House ..	24	231	35	12	251	37	14	360	46	20	17·7
Cranworth Road ..	47	318	42	11	341	43	22	502	48	43	12·6
Greasbrough ..	12	26	12	1	37	14	2	77	22	2	8·4
Thorpe ..	10	14	1	—	21	1	—	33	2	—	3·5
Total ..	93	589	90	24	650	95	38	972	118	65	12·4

MUNICIPAL GENERAL HOSPITAL.

Details of the attendance at the hospital's ante-natal and post-natal clinics, together with particulars of cases admitted into the maternity ward, will be found in Section V of this report, wherein the work of the Municipal General Hospital is described.

NOTIFICATION OF BIRTHS.

The following table gives the births notified during the year :—

Births notified as having taken place within the area :							
From institutions or by doctors :							
Live births	..	..	..	..	..	..	1342
Still births	..	..	..	..	..	..	51
							1393
By midwives :							
Live births	..	..	..	..	..	..	797
Still births	..	..	..	..	..	..	12
							809
By parents :							
Live births	..	..	..	..	..	..	—
Still births	..	..	..	..	..	..	—
							2202

From information supplied by the registrars, the following births were not notified :—

Born in institutions or attended by doctors :

Live births	..	..	..	..	..	..	4	
Still births	..	..	..	..	..	..	—	4

Attended by midwives :

Live births	..	..	..	..	..	..	1	
Still births	..	..	..	..	..	..	—	1
							—	5

HEALTH VISITING.

On the 1st January, 1946, staffing was two below establishment but these vacancies were filled in February by the return of Miss T. Anthony from the Army Nursing Service and the appointment of Miss E. Smith.

A relief health visitor to cover holiday periods and absences for sickness was appointed in May which brought the establishment of district health visitors up to ten. Unfortunately this strength was only maintained until July when Miss Anthony transferred to Twickenham and Miss Caine, the relief health visitor, took over the district thus vacated. Miss Power transferred to the West Riding in October and Miss Taylor, appointed to fill this vacancy, commenced duty on the 3rd December.

Staffing was, therefore, one below strength at the end of the year and repeated advertising has failed to attract any candidates.

The proposal to appoint a health visitor, with a qualification in social case work, to undertake duties outlined in Circular 2866 of the Ministry of Health was implemented in April when Miss M. Hanson commenced duty. The general terms of her office are as under :—

- (1) Supervise the welfare of unmarried mothers and their children—such supervision to be continued until either the mother marries, and mother and child thereby obtain normal and happy family relationships, or until an Adoption Order is made in respect of the child.
- (2) Supervise the welfare of illegitimate children of separated and deserted wives together with the welfare of the mothers concerned.
- (3) Case work in connection with fostering under the Public Health Act, 1936, and child adoption under the Adoption of Children (Regulation) Act, 1939.
- (4) Case work on behalf of registered adoption societies placing children within the area.

- (5) Case work in connection with any problem being investigated by the Department in which the necessary enquiries may reasonably be considered the duty of a social worker.
- (6) Administer such Maternity and Child Welfare social schemes as:—
 Home helps.
 Convalescent treatment for mothers and babies.

With the improvement in the staffing position more attention has been given to health education and the stimulation of interest in immunisation against diphtheria. The report of the local campaign, in which the health visitors assisted, is given elsewhere.

The work of the health visitors, including the health visitor/social worker, is summarised as follows:—

Visits and enquiries in respect of:

Expectant mothers—1st visits ...	1,033	Medical aid enquiries ...	11
Expectant mothers—re-visits ...	355	Social contacts ...	42
Post-natal visits—1st visits ...	603	Health publicity ...	61
Post-natal visits—re-visits ...	49	Survey for Royal College of	
Still-births ...	30	Obstetricians and Gyneacolo-	
Births—1st visits ...	1,790	gists ...	59
Infants under 1 year ...	5,829	Measles ...	104
Infants—1 to 5 years ...	15,095	Chickenpox ...	15
Ineffective visits—under 1 year	332	Pneumonia ...	18
Ineffective visits—1 to 5 years	1,865	Whooping cough ...	163
Defects followed up—under 1 yr.	93	Diarrhoea ...	13
Defects followed up—1 to 5 yrs.	224	Puerperal pyrexia ...	3
Premature infants under 3 mths.	99	Ophthalmia neonatorum ...	3
Illegitimate children—under 1 yr.	344	Tuberculosis ...	585
Illegitimate children—over 1 yr.	349	Tuberculosis—contacts ...	22
School entrants ...	532	Pemphigus neonatorum ...	4
Foster children (Public Health		Scabies ...	41
Act, 1936) ...	81	Mental defectives ...	499
Pre-adoption enquiries ...	75	Public lavatories ...	47
Adoption of Children (Regulation)		V.D. clinic defaulters ...	100
Act, 1939 ...	21	Cancer clinic defaulters ...	5
Attendances at Sheffield and		Nuisances reported ...	37
District Adoption Committee	4	Attendances at:	
Ill-cared for or verminous child-		Ante-natal clinics ...	146
ren—under 1 year ...	238	Child welfare clinics ...	695
Ill-cared for or verminous child-		Nursery medical sessions ...	15
ren—1 to 5 years ...	820	Tuberculosis dispensary ...	136
Infant deaths ...	21	Paediatric clinic ...	11
Home helps ...	75	Immunisation session van ...	40
Total half-days spent visiting ...		2,763	
Houses visited ...		25,472	

During four months of the year, one health visitor was seconded to Thames Street Nursery where she acted as matron pending the appointment of a suitable candidate to that office.

DEPRIVED CHILDREN.

The means whereby the standards of the social problem group may be raised have not yet been attained.

Concentrated home visiting by health visitors is a deterrent, and so in some cases does prevent poor conditions from becoming worse, yet it does not affect any improvement in the standards of the homes of the basically low-standard group. Visits by medical officers also exert only a deterrent influence.

Prosecution of parents has been of value in that it has drawn attention to the extent of the problem and has aroused public opinion.

The imprisonment of parents is neither preventative nor curative; indeed, the end results of such treatment may even prove disastrous, since not infrequently does it result in the total break up of the home and the scattering of the family group—thus adding to the problem of children deprived of a normal home life, so fully discussed in the Curtis Report.

It is a fact that, within the "status quo," there are many children living with their parents who are nevertheless deprived of normal home life. The real problem at issue is how to restore the home life within the family unit to a modern concept of what is normal without disrupting the family unity.

To deal solely with the children, apart from the family, is to perpetuate palliative measures only.

Research and experiment in the rehabilitation of the family should coincide with the appointment of the Children's Committees and the Children's Officer, as envisaged in the Curtis Report, and in the wave of enthusiasm which will attend the launching of the schemes for the care of deprived children there should remain that constant, the deeper concern of the restoration of the family life, containing as it does all the natural attachments and the emotional needs and outlets of the children "subject to be dealt with."

CHILD WELFARE CENTRES.

There has been no expansion of this service during the year. Specialist and treatment facilities available for school children, have been available on equal terms to the children attending the child welfare centres.

Immunisation of pre-school children has been performed during child welfare sessions, as well as at the special immunisation clinics. Whooping cough vaccine has been given on request. Publicity on immunisation was also given at works' canteens and in the schools.

One health visitor was seconded to health publicity work on appointment in February, and she continued this work throughout the year.

Demonstrations and talks to mothers were given at child welfare centres and ante-natal clinics, and help in the making of children's clothing was also afforded.

The following table is an analysis of the attendances at the centres during the year: —

Centre	Sessions	New cases		Total children attending		Total attendances		Medical consultations		Average attendance per session
		Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	
Ferham House	100	318	53	458	520	2553	1884	1156	1376	44·4
Cranworth Road	99	520	81	702	539	3323	1670	1478	1200	50·4
Greasbrough	38	71	9	97	144	532	479	230	278	26·6
Thorpe ...	24	38	2	50	46	305	183	109	106	20·3
Canklow ...	48	137	19	190	158	899	519	406	328	29·5
Nursery ...	23	5	6	14	55	62	515	62	515	25·1
Total ...	332	1089	170	1511	1462	7674	5250	3441	3803	38·9

The estimated population of children in the 0-5 years group is 7,140; therefore, only 41.6 per cent. of the pre-school children now come within centre practice. This is one argument why health visitors should not be withdrawn from their specific duty of home visiting in order to staff child welfare and associated clinics which do not require their full function.

In view of staffing difficulties, it would appear that the time is not far distant when dilution by staff of less qualification will have to be considered if the centres are to continue to function, and perhaps even to survive.

INFANTILE MORTALITY.

The following table gives the details concerning infantile mortality :—

CAUSE OF DEATH	Under 1 week	1-2 weeks	2-3 weeks	3-4 weeks	Total under 4 weeks	4 weeks and under 3 months	3 months and under 6 months	6 months and under 9 months	9 months and under 12 months	Total deaths under one year
All causes : certified	39	11	2	1	53	15	17	5	2	92
 uncertified	-	-	-	-	-	-	-	-	-	-
Small-pox	-	-	-	-	-	-	-	-	-	-
Chicken-pox	-	-	-	-	-	-	-	-	-	-
Measles	-	-	-	-	-	-	-	-	-	-
Scarlet-fever	-	-	-	-	-	-	-	-	-	-
Whooping cough	-	-	-	-	-	-	-	-	-	-
Diphtheria and croup	-	-	-	-	-	-	-	-	-	-
Erysipelas	-	-	-	-	-	-	-	-	-	-
Tuberculous meningitis	-	-	-	-	-	-	-	-	-	-
Pulmonary tuberculosis	-	-	-	-	-	-	-	-	-	-
Other tuberculous diseases	-	-	-	-	-	-	-	-	-	-
Meningitis (not tuberculous)	-	-	-	-	-	-	-	-	-	-
Convulsions	-	-	-	-	-	-	1	1	-	2
Laryngitis	-	-	-	-	-	-	-	-	-	-
Bronchitis	-	-	-	-	-	1	1	-	-	2
Pneumonia (all forms)	2	4	-	-	6	4	5	3	-	18
Diarrhoea	-	-	-	-	-	2	-	-	-	2
Enteritis	-	-	-	-	-	2	5	-	1	8
Gastritis	-	-	-	-	-	-	-	-	-	-
Syphilis	-	-	-	-	-	-	-	-	-	-
Rickets	-	-	-	-	-	-	-	-	-	-
Suffocation, overlying	-	-	-	-	-	2	2	1	-	5
Injury at birth	5	-	-	-	5	-	-	-	-	5
Atelectasis	4	1	-	1	6	-	-	-	-	6
Congenital malformations	5	1	-	-	6	3	1	-	-	10
Premature birth	21	3	2	-	26	-	-	-	-	26
Atrophy, debility & marasmus	2	2	-	-	4	-	-	-	-	4
Other causes	-	-	-	-	-	1	2	-	1	4
Totals	39	11	2	1	53	15	17	5	2	92

Nett births in the year :	legitimate infants	1661
	illegitimate infants	107
Nett deaths in the year :	legitimate	83
	illegitimate	9
Infantile mortality rate per 1,000 births :	legitimate	50
	illegitimate	84

HOME HELPS.

This scheme was originally introduced in 1925 but lapsed owing to wartime labour difficulties. It was decided to revive it and to an advertisement in the local press eight women replied, while thirteen were sent from the Labour Exchange. Of these twenty-one applicants interviewed, seven were unsuitable; five had accepted alternative employment when called upon to take cases; four cancelled their applications for domestic reasons; two were appointed whole-time and three part-time.

From May, 1946, these five home helps attended twenty-three cases for a total of three hundred and forty days, giving an average of fifteen days per case.

Publicity has been given to the scheme through municipal midwives, posters, and at various women's guild meetings in the town. The mothers are slowly appreciating this Home Help Service, the success of which depends entirely on employing the correct type of reliable woman.

OPHTHALMIC TREATMENT

No change has taken place in the year under review. The following table gives details of the work undertaken for expectant mothers and for children under five years of age :—

Group	Cases	Refractions attendances	Re- inspections	Spectacles prescribed
Mothers	—	—	—	—
Children	67	187	270	54

AURAL TREATMENT.

No change occurred in the arrangements for treatment of aural cases during the year.

205 pre-school cases attended the clinics for treatment and made 763 attendances. 77 pre-school cases were admitted to the Municipal General Hospital for operative treatment and spent 93 days in hospital. In 2 cases no operation was performed.

ORTHOPAEDIC SCHEME.

There was no change to report in the operation of this scheme and the details of pre-school children attending the orthopaedic clinics are given in the following table :—

Sessions held	New cases		Old cases re-attending		Total children attending		Examinations made	
	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year	Under 1 year	Over 1 year
7 ..	5	15	1	25	6	40	9	58

103 intermediate treatments were given to these patients at the remedial exercises clinics.

Four children received indoor treatment at the Adela Shaw Orthopaedic Hospital, Kirbymoorside, during the year.

DENTAL TREATMENT.

The following table gives a summary of the dental work done during the year for expectant and nursing mothers and for children under five years of age, compared with similar work in 1945:—

	Maternity	Child welfare	Total 1946	Total 1945
Individuals treated	271	125	396	326
Attendances made	881	169	1050	1013
Extractions :				
permanent teeth	1555	—	1555	1230
temporary teeth	2	219	221	271
Fillings :				
permanent teeth	59	—	59	68
temporary teeth	—	23	23	9
Anaesthetics :				
local	37	7	44	55
general	358	129	487	409
Other operations	463	19	482	453
Patients supplied with dentures	56	—	56	75

Twelve more children under school age were treated during the year than in 1945 and the number of temporary teeth extracted was fifty-two fewer than in the preceding year; this satisfactory improvement in the state of the pre-school children's teeth has thus continued steadily since 1938 and will undoubtedly be apparent in future years when these children are of school age. There was also an increased amount of conservative work but the number of fillings, even now, is probably only a minute fraction of what could be done if the dentists' time was not fully occupied with work of a more urgent nature, i.e., filling permanent teeth for older children. However, with an additional dentist it may be possible to extend this reparative work and eventually to give routine inspections at six monthly intervals to these pre-school children.

The number of patients receiving dental treatment after reference from the ante-natal centres was 27 per cent. higher than in 1945, 271 compared with 213 and a proportionate increase is to be noted in the permanent teeth extracted, 1,555 as against 1,230 in 1945. The number of patients requiring dentures shows a decrease of 19,

but with the average number of teeth lost per patient remaining at roughly the same level as in the preceding years, it is doubtful if this indicates any marked improvement in the dental condition of the expectant mothers. The need for a dental mechanic on the staff is great, both for this denture work and the orthodontic and prosthetic work done for the school children. The suggestions made last year for a routine dental inspection of all ante-natal patients still hold good. The treatment of these two classes of patients as "priority classes" under the proposed new Health Act is understandable as an emergency measure until sufficient dentists are trained to give an adequate service to all sections of the community. The dental condition of expectant mothers is not improved in the majority of cases by the fact that they receive very little, if any, conservative treatment after leaving school, and indeed much of the good done in school dentistry is at present wasted by several years of neglect after leaving school. However, it is to be hoped that in the not too distant future increased provision of dental treatment will be made to these adolescents.

The following table gives details of applications for dentures received from expectant and nursing mothers :—

					Full dentures	Partial dentures
Applications received	..	..	..	..	34	23
Granted free	..	..	..	..	1	2
Granted half-cost	..	..	..	..	1	1
Granted at cost	..	..	..	..	32	20
Approximate cost	..	..	..	..	£124/2/-	£43/7/-
Amount recovered	..	..	..	..	£118/12/6	£39/8/-

ILLEGITIMATE CHILDREN.

MINISTRY OF HEALTH CIRCULAR 2866.

During 1946, the scheme of welfare of the unmarried mother and her child was implemented in accordance with the recommendations of the circular by the appointment of Miss M. Hanson, health visitor/social worker, who commenced duties in April. The general terms of her office are stated earlier in this report under "Health Visiting."

Illegitimate pregnancies are brought to the notice of the Department of Health through the usual channels, namely, relatives, health visitors, the hospital ante-natal clinics and municipal midwives.

Contact during the ante-natal period affords the opportunity to discover the difficulties, doubts and upsets that occur at this time. By discussion and guidance from a neutral source many problems are lessened and the mother is prepared to some extent about the future before her child is born. Talks with the expectant mother's parents often change an unpleasant or hostile attitude and thus contribute in no small measure towards the welfare of mother and child.

Because of social conventions, limited or unsuitable accommodation, some mothers have no alternative to adoption. The mother who keeps her child suffers many hardships, especially when her own family cannot or do not help in her misfortune. She tends to wander from one abode to another, work of a suitable nature is difficult to find, and consequently the child is neglected. The need for hostel accommodation cannot be too greatly stressed. For some unmarried mothers the period shortly before and immediately after the confinement is one beset with difficulties. New adjustments require to be met by the mother and these can never be acquired when she wanders hither and thither without plan or purpose in life. The provision of hostel accommodation would be invaluable during this unsettled period.

The problem of married women with children by men other than their husbands presents particular difficulties which must be dealt with separately. Adoption is often the only solution open to the mother when her husband threatens disruption of the family if the illegitimate child is not removed.

The live register of illegitimate children under five years of age on the 31st December, 1946, was 280, and 106 such children were either born in, or moved into the area during the year.

The following analysis refers to children born during 1946 and dealt with during the year, and defines their social state as on the 31st December, 1946.

A. MOTHER AND CHILD TOGETHER AND:						
Parents co-habiting	...	...	...	...	...	23
Parents now married, child legitimated	...	...	...	...	...	2
Child accepted by husband on marriage	...	...	...	...	...	3
Child accepted by husband after reconciliation	...	...	...	...	...	1
With relatives	...	...	...	...	...	6
At own home	...	...	...	...	...	34
In lodgings	...	...	...	...	...	4
In domestic service	...	...	...	...	...	1
Total	...	...	...	...	...	74
B. MOTHER AND CHILD SEPARATED AND:						
Child adopted	...	...	...	...	...	10
Child fostered	...	...	...	...	...	2
Child resident in day nursery	...	...	...	...	...	1
Child resident in Social Welfare Committee's nursery or home	...	...	...	...	...	1
Total	...	...	...	...	...	14
Mother and child removed out of area, records sent out	...	...	...	...	...	11
Child died within 14 days of birth	...	...	...	...	...	4
Child died over 14 days and under 1 year	...	...	...	...	...	3
Lost sight of	...	...	...	...	...	-
Total	...	...	...	...	...	18

ADOPTION OF CHILDREN (REGULATION) ACT, 1939.

The health visitor/social worker acted as the agent of all the registered adoption societies placing babies within the area during 1946, and sat as a member of the Sheffield and District Adoption Committee of the Sheffield Council of Social Service which is the registered society placing most of the children within the Borough.

During the year, the County Borough Council supported the work of this Adoption Committee by making a grant of £60 towards the expenses incurred in its work relating to adoption in Rotherham.

A contribution has also been made to the National Council for the Unmarried Mother and her Child.

Home reports were requested by the under-mentioned adoption societies prior to the placing of a child:—

The Sheffield and District Adoption Committee of the Sheffield Council of Social Service.

The Leeds Diocesan Rescue and Protection Society.

The National Adoption Society.

The Homeless Children's Aid and Adoption Society.

The York Adoption Society.

Altogether, twenty-nine initial reports were submitted, and sixteen babies were later placed. One child was removed by the mother after placing.

The health visitor/social worker continued the supervision of these children until an adoption order had been made when responsibility devolved on the health visitor of the area in which the child resided.

A total of 70 pre-adoption visits were paid by the social worker to this group. In all these cases the babies were placed in good homes, and the care of the children was of a high standard. In every case a home visit was paid within the first week of placing, as well as subsequent visits, and a final report was furnished to the adoption societies concerned before expiry of the three months probationary period.

The scope of work in the placement of children for adoption under the Adoption of Children (Regulation) Act, 1939, and additional to the above was as follows:—

Five children came under statutory supervision during the year. Formal notice was received in respect of four of the children, and in one case notice was received after the reception of the child.

Adoption orders were granted in four of these cases. Sixteen home visits were paid by the social worker during the period pending adoption. In the fifth case the adopters did not proceed with their intention. Arrangements were made for the transfer of the infant to new adopters, notice having previously been given to the intermediary of the intention not to proceed with the adoption. The receiving authority confirmed the reception of this infant.

No children in this group were under statutory supervision at the end of the year.

Of the ten illegitimate Rotherham children born and placed for adoption during 1946, four were placed by the Sheffield and District Adoption Committee and one by the Sheffield Moral Welfare Worker. The provisions of the Act did not apply to the other five who were placed privately, that is on an arrangement between the mother and the adopter. Of the five, two were placed within and three without the Borough. The reception of the latter was confirmed by the receiving Authority. Of the two placed within the Borough one adoption order has been granted and one is pending.

The weaknesses of the existing law relating to child adoption were again demonstrated during the year under review. The fact that the law allows any person with little formality to act as an adoption agent and that a mother possesses the right of "giving away" her child with no formality at all, provides loopholes whereby many haphazard adoptions are made.

In such "privately" arranged adoptions the child is often placed without any enquiries being made as to the suitability of the adopters, or of the environmental conditions into which the child is received; no period of probation or medical examination is required, and no one has power to remove a child so placed, unless the conditions are sufficiently bad that a charge of child neglect could be made under the child life protection laws.

One glaring example of such an unsatisfactory adoption came to notice during the year.

An unmarried mother, in 1944, when her baby was six months old, placed the child for adoption outside the Borough. Later, an adoption order was made in respect of the child, but the natural mother made a bargain with the adopters that she should be notified from time to time of the child's welfare.

During 1946, letters concerning the child ceased, so the natural mother paid a visit to the home of the adopting parents. There she found that the adopters had separated, and she was so dissatisfied with the conditions in which the child was living that she persuaded the adopting mother to surrender the child, whom she brought back to Rotherham.

The question of legal status now arose since proceedings in Courts have determined that an adoption order once made cannot be revoked. The matter was referred to the National Council for the Unmarried Mother and her Child which made a grant towards legal expenses.

The help of the Sheffield and District Adoption Committee was obtained and finally a new adoption order in favour of the natural mother was obtained, the adopting mother consenting, and the Court exercising discretion in the absence of the adopting father, who could not be traced.

A second grave feature connected with adoption was noted during the year.

A boy and girl born of the same mother, but by different fathers, are now adopted within the town, the fact of blood relationship not being known by either adopting parents. The difference in the ages of the children is not great, and the possibility of incestuous union later in life, although remote, is not impossible—a feature without legal safeguard in the existing law relating to child adoption.

The Curtis Committee recommended adoption with proper safeguards, as the best method of providing substitute homes for children deprived of their natural homes. On the face of things, this seems an easy and happy solution. But in practice, “home finding” and the selection of the child for the home is a very delicate social experiment. Not all well-meaning people are actually suitable to have the care of children. Factors of heredity and environment, of tolerance and stability, of courage and fortitude must be carefully assessed, and people competent to undertake this work are rare.

The care given to placement by the Sheffield and District Adoption Committee is evident in the statistics which they furnished for 1946, which were as under: —

Applications from prospective adopters ...	...	263
Applications for homes for babies ...	...	247
Babies placed during the year ...	...	93

There are some children for whom adoption is the only solution, but, before launching such an extensive scheme of home substitution and the scattering of family groups as envisaged in the Curtis Committee recommendations, should not some thought be given to the restitution of the natural homes of the children concerned?

In 1946, Dr. R. C. Wofinden estimated that, of the children admitted to the Council's scattered homes during the past ten years, 68.1 per cent. were admitted because of failure—by various reasons—of parental care. It has been authoritatively computed that 75 per cent. of the children considered homeless by the Curtis Committee were in fact homeless only in the extent and degree of failure in social and environmental conditions of their natural homes, and not that they were parentless, or lacking in family relationship.

CHILD LIFE PROTECTION (SECTIONS 206-220, PUBLIC HEALTH ACT, 1936).

At the beginning of the year nine children were fostered for reward, and new registrations during the year included premature infants retained in maternity homes after the discharge of the mother. The total number of children under supervision at the end of the year was seven.

Eighty-one visits were paid by the infant life protection visitors to children fostered under the Act.

DAY NURSERY.

Under the joint Circular 221/45 of the Ministry of Health and Circular 75 of the Ministry of Education dated 14th December, 1945, the wartime arrangements for nursery care in nursery schools and day and 24-hour nurseries, etc., were adapted to post-war needs and details of the future arrangements were outlined.

The Council considered the future of the Thames Street Wartime Nursery and proposed that as from 1st April, 1946, when it came under the new arrangements, it should be continued on a seven day 24-hour basis, providing approximately 40 places for children of 0-2 years and 40 for 2-5 years. The Ministries also detailed the arrangements for the purchase or renting of the huts and for the purchase by the local authority of the equipment provided by them in the nursery. At the end of the year no definite arrangements had been made and negotiations were still proceeding.

The Council also expressed its opinion to the Minister when he queried the Council's proposals that there was an urgent need for the nursery to be run on a seven day week and 24-hour basis and maintained that the nursery would not otherwise fulfil its purpose. Details of the children catered for and the reasons for their care were also submitted.

The Minister in June approved the Council's proposals on a 24-hour basis on the understanding that the expenditure incurred in making provision for children in categories other than those admitted on industrial grounds would not be eligible for the special grant outlined in Circular 221/45 and asked for records of children admitted as normal Child Welfare cases to be kept. The percentages of children admitted from 1st April to the end of the year for industrial reasons were 85.33 by day and 82.75 by night.

The following table gives details of the working of the nursery during the year: —

Month					Nursery open		Total attendances		Average attendance	
					Days	Nights	Day	Night	Day	Night
January	...	...	...	...	31	31	925	542	29·8	17·5
February	...	...	...	...	28	28	743	376	26·5	13·4
March	...	...	...	...	31	31	636	291	20·5	9·4
April	...	...	...	...	27	27	589	243	21·8	9·0
May	...	...	...	...	31	31	704	319	22·7	10·3
June	...	...	...	...	26	26	850	311	32·7	12·0
July	...	...	...	...	31	31	777	370	25·1	11·9
August	...	...	...	...	29	29	642	297	22·1	10·2
September	...	...	...	...	30	30	671	330	22·4	11·0
October	...	...	...	...	31	31	759	393	24·5	12·7
November	...	...	...	...	30	30	763	427	25·4	14·2
December	...	...	...	...	29	28	556	289	19·2	10·3
					354	353	8615	4188	24·3	11·9

Miss Powell, Matron, resigned her appointment on 4th May, 1946, and until 16th September, when Mrs. Ardron commenced her duties, Miss A. Simm, Health Visitor, undertook the supervision of the nursery.

As a result of the change of ownership to the local authority it was laid down that children would only be admitted to the nursery if their parents were resident in the County Borough area, or, if not resident, working in the Borough. All other children, even on sentimental grounds, must be excluded.

SECTION X

MENTAL DEFICIENCY.

In the following table particulars are given for the year 1946 of mental defectives (A) "subject to be dealt with" by the Local Authority, and (B) who may become "subject to be dealt with" by the Local Authority.

A—Number of cases "subject to be dealt with" :—

1. Under "order" :—					Males	Females	Total
(a) (1) In institutions (excluding cases on licence).							
Under 16 years of age	..	..	..	..	6	7	13
Aged 16 years and over		..	..	..	32	33	65
(2) On licence from institutions.							
Under 16 years of age	..	..	..	..	—	—	—
Aged 16 years and over		..	..	..	3	3	6
(b) (1) Under guardianship (excluding cases on licence).							
Under 16 years of age	..	..	..	..	—	—	—
Aged 16 years and over		..	..	..	1	3	4
(2) On licence from guardianship.							
Under 16 years of age	..	..	..	..	—	—	—
Aged 16 years and over		..	..	..	1	—	1
2. In "places of safety."							
Under 16 years of age	..	..	..	..	—	—	—
Aged 16 years and over		..	..	..	—	—	—
3. Under statutory supervision.	..	..	..	..	25	20	45
of whom—							
Awaiting removal to an institution	..	..	..	..	8	5	13
4. Action not yet taken under any one of the above headings	..				17	19	36

B.—Number of cases not at present "subject to be dealt with" but for whom the Local Authority may subsequently become liable

..	40	52	92
----	----	----	----	----	----	----	----	----	----

The total number of mental defectives under the supervision of the Department at the end of 1946 was 262 comprising 125 males and 137 females. Of this number 89 were the subject of Orders under the Mental Deficiency Acts, 78 being resident in certified institutions, 6 on licence leave from such institutions, and 5 under Guardianship. The placing of these defectives is shown in tabular form below :—

Institutional :	Detained under Order		Licence Leave	
	Males	Females	Males	Females
St. Catherine's, Doncaster ..	36	34	3	2
Whittington Hall, nr. Chesterfield ..	—	5	—	1
Stoke Park Colony, near Bristol ..	2	1	—	—
	38	40	3	3
<hr/>				
Guardianship :				
Brighton Guardianship Society ..	—	3	—	—
National Association for Mental Health ..	1	—	—	—
Brother's Guardianship	1	—	—	—
	2	3	—	—
	<hr/>			

STATE INSTITUTIONS.

Seven defectives, in addition to those listed above, were subject to Orders under the Mental Deficiency Acts and detained in State Institutions. Five males and one female were detained in Rampton State Institution and one male in the Moss Side State Institution. All these cases have exhibited strongly vicious or sexual proclivities and for these reasons have been admitted to State Institutions rather than to other certified institutions. The Rotherham Authority will be responsible for the maintenance of these defectives in the event of their transfer to other institutions or discharge. No new cases have been admitted to State Institutions during 1946.

ORDERS UNDER MENTAL DEFICIENCY ACTS.

Three petitions for Orders under the Mental Deficiency Acts were presented during 1946 and in each case an Order was made for admission to St. Catherine's, Doncaster. The patients were:—

1. A female imbecile, aged 9 years, whose mother was dead and who was showing delinquent tendencies owing to lack of parental supervision.
2. A female imbecile, aged 9 years, who had been resident all her life in public institutions. This patient is the illegitimate daughter of a certified defective.
3. A feeble-minded girl, aged 13 years, who is the third child in a family of ten. This family is registered with this Department as a "Problem Family" and the defective was virtually uncared-for.

A feeble-minded youth of 17 years was admitted to St. Catherine's by order of the Court under Section 8(1)(b) of the Mental Deficiency Act, 1913, having pleaded guilty to a charge of larceny.

LEAVE OF ABSENCE ON LICENCE FROM INSTITUTIONS.

At the end of 1945 there were on licence leave from institutions three males and four females. One young man (aged 28) who had been on licence leave from St. Catherine's Institution since August, 1942, was discharged from Order by the Board of Control during the year under review. An initial trial period of licence leave was granted to an imbecile youth of 19 years who had been in St. Catherine's for just over ten years. In this case, although there has been some improvement in the defective's mental and physical condition, it is not thought likely that he will be able to take up employment. The home circumstances are very good and the parents are alive to the responsibilities involved—the patient is, however, not difficult to manage and has shown no anti-social tendencies.

In one case licence leave was discontinued at the request of the defective's parents. The imbecile girl concerned had been at home for almost three years when her mother realised that the mental and physical strain of providing the care and attention which were necessary in such a low grade case was proving too great and the patient was, therefore, readmitted to St. Catherine's.

In the remaining cases—two males and two females from St. Catherine's and one female from Whittington Hall—licence leave continued satisfactorily throughout the year.

GUARDIANSHIP.

No new cases have been admitted to guardianship during the year. Mention was made in last year's report of a female defective under the supervision of the Brighton Guardianship Society who was granted licence leave from her statutory guardian on account of domestic difficulties. The patient settled down in her new (temporary) home and at the suggestion of the Guardianship Society a Varying Order was obtained transferring the patient to the statutory guardianship of the temporary guardian. An application was made to the Board of Control for discharge from Order in respect of a young man who had been on licence leave to his brother in Rotherham. The application was made by the brother but was not supported by this Department and the Board's suggestion that the defective be transferred to the statutory guardianship of his brother was carried out.

GENERAL.

Nine defectives, two males and seven females, were inmates of either the Municipal General Hospital or The Mount at the end of the year and 20 were receiving outdoor relief from the Social Welfare Committee. Statutory supervision was exercised by the Department of Health in 45 cases (25 male and 20 female) and of this number 13 were awaiting institutional accommodation. All the other defectives were under the voluntary supervision of the Department in their own homes.

Domiciliary supervision was carried out by the Health Visitors who made 499 visits to the homes of defectives during the year. The value of this form of domiciliary visiting cannot be over-estimated. The health visitors are each allocated a defined district of the Borough and within that area carry out a variety of functions. In consequence the health visitor gains access to a large percentage of the homes in her district—she becomes well known and is a friend and adviser to many. There is no barrier of strangeness to surmount, she ceases to be regarded as an “official,” she accumulates a valuable store of information as to the social and economic background of the locality in general and of many families individually. Because of the diversity of her responsibilities, she is not specifically “labelled” in any way and her varied experience helps to establish an atmosphere of confidence (and co-operation) with the family.

Nine cases were notified by the Local Education Authority to the Local Authority under Section 57 of the Education Act, 1944. All the cases were notified under subsection 3 of that section and all but one were placed under statutory supervision. The remaining patient was admitted to St. Catherine's.

Six married and two unmarried defectives gave birth to children during 1946 and one male and one female defective married during the year.

Two defectives died during the year:—

1. A feeble-minded girl of 23 years whose death was the subject of a Coroner's Inquest. The verdict was “death by misadventure”—her clothing caught fire whilst she was at work as a maid.
2. An epileptic imbecile man who died in the Municipal General Hospital at the age of 43 from progressive cachexia and epilepsy.

ST. CATHERINE'S INSTITUTION.

Rotherham's allocation of beds at St. Catherine's remains unaltered at 30 beds for males and 35 for females. At the end of 1946 there were in residence 36 males and 34 females from Rotherham with a further three males and two females absent from the institution on licence leave. This represents a net increase of four females in residence and a net decrease of one female on licence leave as compared with the end of 1945. These changes were brought about by the admission of one male and three females; the discharge from Order of a man who had been on licence leave from St. Catherine's; the granting of an initial period of licence leave to a male imbecile; and the cancellation of licence in the case of a female imbecile.

The two children's wards at St. Catherine's which had been used by the Ministry of Health for Emergency Hospital purposes, became available during the early part

of 1946. Not many of the beds were taken up by new admissions as the additional accommodation was used in the main to reduce the serious overcrowding in other wards and to bring about a more desirable redistribution of patients. With Rotherham's allocation of beds remaining at 65, and since 70 are occupied, with a further 5 patients on licence, it must necessarily follow that new patients will only gain admission by the death or discharge of those at present in the institution.

OBSERVATIONS.

Attention has been drawn during the past few years to the very urgent need for increased provision of institutional accommodation. Towards the end of 1946 the South West Yorkshire Joint Board for the Mentally Defective called for estimates from the various constituent authorities of

- (1) The number of defectives now requiring accommodation, and
- (2) The estimated number of defectives likely to require accommodation during the period 1947/1950.

Rotherham's estimate under heading (1) was 14, 6 of which were required for the lowest grade patients—idiots, debilitated and bedridden defectives who require continuous nursing supervision. It was also estimated that Rotherham would need a further 50 beds during the period 1947/1950, after assuming that the 14 now requiring accommodation had been dealt with by admission. The bulk of this provision is for male and female defectives over the age of 16 and including all mental grades except idiocy. When it is considered that Rotherham's needs in this direction will be nearly doubled within the space of four years, that at the end of 1946 fourteen patients were urgently in need of accommodation, and that six of these came within the idiot, debilitated, or bedridden class, some idea of the urgency of the problem is indicated. This can only be remedied by a speedy and extensive building programme.

Similar conditions prevail at the other end of the deficiency scale. There is virtually no accommodation available for the proper treatment of children in residential special schools, and the provision of special classes in ordinary schools for the proper tuition of the "merely dull or backward" child is quite inadequate.

These conditions militate against an efficient mental deficiency service—and all concerned (and particularly the unfortunate parents) experience complete frustration when the outlook for the next few years is considered.

SECTION XI

CLINICAL LABORATORY.

Early in the year, Dr. E. H. Gillespie, Clinical Pathologist, who was in charge of the laboratory work from its inception and who performed good work in the development of the laboratory service, resigned his appointment and he left the service on 22nd April. He was succeeded by Dr. L. P. Clarke who commenced his duties on 1st July, 1946.

Professor Wilson Smith, of Sheffield University, who had acted as Honorary Adviser in Bacteriology to the laboratory also gave up his duties during the year on his leaving his university appointment, and it is pleasing to record that his successor, Professor C. P. Beattie, has consented to act in this capacity.

During 1946, the development of the laboratory has continued, and whilst the work of examination of specimens has remained at the same level as in the previous year, a considerable increase of work resulted from the dispensing of penicillin for the hospitals and health services of the Borough.

Up to June, 1946, penicillin was issued free by the Government on a restricted basis, but after that month when it was placed on open sale, the calls upon the laboratory grew very quickly. In the reports for previous years, the figures for the dispensing of penicillin had been included on a unit basis under the heading of bacteriology and in view of the increase referred to, these units have been excluded from the statistics of the preceding years and due reference is made to this later on in this section.

The comparative statistics relating to the specimens examined, expressed in unit values, for the past three years are as follow:—

User	Specimens examined (units)			Percentage of total work performed		
	1944	1945	1946	1944	1945	1946
Municipal General Hospital ...	6494	8928	7897	35·6	26·0	23·3
Rotherham Hospital	2823	9215	10739	15·4	26·8	31·7
Oakwood Hall Sanatorium	1016	1333	916	5·6	3·9	2·7
Isolation Hospital	212	541	1440	1·1	1·6	4·2
Practitioner Service	793	4574	5040	4·4	13·3	14·9
Department of Health	4192	7301	7064	23·1	21·2	20·8
Tuberculosis Dispensary	361	323	368	1·9	0·9	1·1
Venereal Diseases Centre	1223	1694	265	6·8	4·9	0·8
Rotherham R.D.C.	1047	415	147	5·8	1·2	0·4
Maltby U.D.C.	53	73	43	0·3	0·2	0·1
Total	18214	34397	33919	100·0	100·0	100·0

During the year two additional trained technicians have been engaged and the laboratory at Rotherham Hospital, which had been closed in 1940 due to the technician being called to the Forces, has been re-opened for five days per week and is staffed by a technician under the supervision of the Pathologist.

The increase in work and in staff renders it imperative that larger premises should be found at the earliest possible moment and it is hoped that the next annual report will announce that this has been completed. Space is urgently required for histology, the preparation of media, the investigation of the Rhesus factor in pregnant women, haematology and biochemistry. There is also neither waiting room nor lavatory for patients.

The application of the laboratory service to the various hospitals, clinics, etc., and special aspects of the work during the year were as follow: —

PUBLIC HEALTH AND CLINICS.

The year has been singularly free from epidemics. One small outbreak of diphtheria, one of sonne dysentery and one due to salmonella typhi-murium are all that there are to report. All these were easily got under control.

As before, samples of milks distributed throughout the Borough were examined monthly. The majority were up to standard. Unsatisfactory milks were further investigated to enable the producers to improve the quality.

The necessary apparatus for the examination of ice-cream is on order and as soon as delivery is obtained this will be undertaken.

HOSPITALS.

The re-opening of the laboratory at Rotherham Hospital has proved of great advantage and the number of investigations carried out there continued to increase. Liaison between the wards and the laboratory is also facilitated.

HAEMOTOLOGY.

In addition to cases of pernicious anaemia, arrangements are now made for periodic blood examinations on patients undergoing various forms of treatment which may cause leucopenia or agranulocytosis such as radium and thio-urocil therapy. At the end of the year there were 99 cases attending regularly for such routine check investigations.

PENICILLIN.

The release of penicillin on to the market during the year has led to an enormous increase in its use. At the present time the total quantity of penicillin used in Rotherham is over ten times the amount used a year ago. Improved methods are resulting in a big drop in the unit value but, nevertheless, it is considered that this should be shown separately instead of including it under Bacteriology as was done in last year's report as the time is coming when penicillin will cease to be a laboratory responsibility, and will be transferred to the dispensaries.

The figures for the dispensing of penicillin expressed in unit values for the years 1945 and 1946 show the increased development referred to earlier in this report.

	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sep.	Oct.	Nov.	Dec.	Total
1945	—	—	59	225	333	103	416	470	684	852	1192	865	5199
1946	1548	1247	1350	1429	1512	1254	1530	2292	3234	3930	3906	4464	27696

From the beginning of June, 1946, the laboratory undertook the issue of penicillin on a pricing system based on the actual cost of the drug plus a fee for dispensing from bulk. For the purposes of comparison with the previous year, the figures given above represent the unit value of the work involved in dispensing. Statistics for future years will be given in the form of the actual amounts of the drug dispensed from the laboratory in mega units.

Details of the examination of specimens expressed in unit values performed for the hospitals and services using the laboratory month by month during the year are given in the following table: —

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total	Per cent.
Total number of specimens examined	728	578	723	557	697	471	477	413	468	468	459	489	6528	—
Unit values of specimens examined from :														
Municipal General Hospital ..	995	989	713	583	703	402	521	598	555	638	604	596	7897	23·3
Rotherham Hospital ..	1232	807	1017	991	841	819	728	751	994	822	966	771	10739	31·7
Oakwood Hall Sanatorium ..	81	60	72	70	101	72	66	60	82	114	50	88	916	2·7
Isolation Hospital ..	75	107	115	165	204	294	199	91	27	42	67	54	1440	4·2
Practitioner Service ..	600	615	593	393	427	371	414	311	363	340	388	225	5040	14·9
Department of Health ..	701	449	1002	601	1091	451	408	357	405	531	437	631	7064	20·8
Tuberculosis Dispensary ..	20	38	49	52	40	24	16	18	28	40	31	12	368	1·1
Venereal Diseases Centre ..	16	10	52	4	48	26	18	6	15	10	16	44	265	0·8
Rotherham R.D.C. ..	74	11	16	10	21	—	—	5	—	—	10	—	147	0·4
Maltby U.D.C. ..	—	—	—	—	16	5	—	—	—	—	22	—	43	0·1
Totals	3794	3086	3629	2869	3492	2464	2370	2197	2469	2537	2591	2421	33919	100·0

The growth of the work of the laboratory is shown in the following table which gives the number of specimens examined month by month and their unit values during the years 1944 to 1946:—

	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Total
Total number of specimens examined :													
1944	241	289	387	273	419	369	415	396	385	410	486	397	4467
1945	515	548	593	601	625	826	563	661	451	616	638	559	7196
1946	728	578	723	557	697	471	477	413	468	468	459	489	6528
Unit values of specimens examined :													
1944	1180	1192	1636	1097	1420	1447	1770	1519	1475	1724	1963	1791	18214
1945	2093	2600	2812	2801	2934	4027	2780	3069	2013	3126	3294	2848	34397
1946	3794	3086	3629	2869	3492	2464	2370	2197	2469	2537	2591	2421	33919

The types of examinations given in unit values performed for the hospitals and services were as follow :—

Specimens examined from	Haemato-logy	Urine	Bio-chemistry	Bacterio-logy	Diphtheria swabs	Tuber-culosis sputa	G.C. smears	Milk	Mis-cellaneous	Total
Municipal General Hospital	3490	1070	943	2335	x	x	x	—	59	7897
Rotherham Hospital ..	4999	955	1186	3566	x	x	x	—	33	10739
Oakwood Hall Sanatorium	23	12	—	14	x	861	—	—	6	916
Isolation Hospital ..	22	24	—	61	1218	2	—	—	113	1440
Practitioner Service ..	1893	660	257	2046	x	x	x	—	184	5040
Department of Health ..	8	51	—	414	4750	1199	—	612	30	7064
Tuberculosis Dispensary ..	—	2	—	—	—	359	—	—	7	368
Venereal Diseases Centre ..	—	—	—	6	—	—	250	—	9	265
Rotherham R.D.C. ..	—	—	—	46	101	—	—	—	—	147
Maltby U.D.C. ..	—	—	—	—	43	—	—	—	—	43
Total	10435	2774	2386	8488	6112	2421	250	612	441	33919
Per cent.	30·8	8·2	7·0	25·0	18·0	7·1	0·8	1·8	1·3	100·0

In the preparation of the above tables, all specimens of a public health nature examined from the hospitals and medical practitioners have been allocated to the examinations performed for the Department of Health. Similarly, specimens examined for gonococci from these sources have been allocated to the Venereal Diseases Centre, and are shown thus x.

The following summary gives the types of investigations which have been performed since 1944 expressed in unit values and also as a percentage of the total work of the laboratory.

		Haemato-logy	Urine	Bio-chemistry	Bacterio-logy	Diphtheria swabs	Tuber-culosis sputa	G.C. smears	Milk	Mis-cellaneous	Total
Investigations performed (unit values) :											
1944	..	6404	1204	1084	1812	4404	1975	1223	—	108	18214
1945	..	10633	2303	3620	9440	3270	2969	1678	404	80	34397
1946	..	10435	2774	2386	8488	6112	2421	250	612	441	33919
Percentage of total work :											
1944	..	35.1	6.6	5.9	10.0	24.3	10.8	6.7	—	0.6	100.0
1945	..	30.9	6.7	10.5	27.5	9.5	8.6	4.9	1.2	0.2	100.0
1946	..	30.8	8.2	7.0	25.0	18.0	7.1	0.8	1.8	1.3	100.0

